Job satisfaction among health care workers in tertiary care hospitals and its effect of satisfaction level on their absenteeism.

DISSERTATION

For award of the degree of

Master of Hospital Administration

Santosh Deemed to be University, Ghaziabad

Neha Bharti

Master of Hospital Administration Batch 2022- 2024

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Neha Bharti
[Batch 2022-2023]

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INTRODUCTION

Job satisfaction is a crucial factor in an organization's health, impacting productivity and turnover rates. In healthcare settings, job satisfaction is especially important due to heavy workloads, stress, and critical patient conditions. Factors affecting job satisfaction among healthcare personnel include workload, work environment, interpersonal relationships, recognition, and growth opportunities.

Healthcare work is emotionally draining and involves high levels of pressure and long hours, making it essential to consider job satisfaction to ensure workforce well-being and quality care. Satisfied healthcare workers are more motivated, engaged, and committed to their work, while dissatisfaction results in burnout, disengagement, and reduced performance.

Low job satisfaction among health workers leads to absenteeism, which affects continuity of care, productivity, and patient safety. Understanding the factors determining job satisfaction and low absenteeism contributes to knowledge of the work environment and how it can be improved to attain job satisfaction and low absenteeism among healthcare workers.

Job satisfaction is an emotional response defining the degree of liking or disliking towards job-related factors. It is essential for employees to feel a sense of satisfaction with their jobs to avoid frustration, anger, and depression. Studies have shown that increased job satisfaction leads to higher morale, loyalty, commitment, retention, and productivity.

In today's competitive environment, organizations now demand better job satisfaction and employee retention. By understanding the factors determining

job satisfaction and addressing them, organizations can improve their workforce management, retention, and overall efficiency in healthcare delivery. Job stress is a significant issue that can lead to reduced productivity, accidents, absenteeism, lower morale, increased conflict, and physical and emotional problems. It is associated with low job satisfaction and poor life satisfaction. Job satisfaction is a feeling of attainment of goals or objectives, while job dissatisfaction results in an absence of motivation at work.

Researchers describe ob satisfaction arises from a blend of psychological, physiological, and environmental factors that lead an individual to feel content with their job. Conversely, job dissatisfaction is an unpleasant emotional state that occurs when a person perceives their job as hindering the achievement of their work-related goals and values.Both satisfaction and dissatisfaction are a function of the perceived relationship between human values and needs and potential contributors to keeping the job or forfeiting it.

Job satisfaction is important in everyday life, as organizations have immediate effects on their employees, reflecting their feelings about their work. Employers benefit from satisfied employees as they will be happy and benefit from less staff turnover. However, given the significant amount of time employees spend at work, it's essential that they find happiness and fulfillment in their roles.

Components of Job Satisfaction

Job satisfaction is a complex concept that encompasses various components such as the work environment, compensation and benefits, job roles and responsibilities, work-life balance, recognition and appreciation, and career advancement opportunities. A positive work environment, including good relationships, a fair organizational culture, and opportunities for growth and development, significantly contributes to job satisfaction. Fair and competitive

pay, along with attractive benefits packages, can enhance job satisfaction. Job roles and responsibilities should be clear and understood, allowing employees to utilize their skills and strengths effectively. Work-life balance is crucial, as employers that promote it demonstrate a commitment to employee well-being. Recognition and appreciation for contributions can also boost morale. Career advancement opportunities are also essential for job satisfaction.

There are three types of job satisfaction:

intrinsic (indeed enjoyable) job satisfaction, extrinsic (related to external factors like pay, benefits, and working conditions), and social (derived from positive relationships with colleagues and supervisors).

There are three main factors contributing to job satisfaction:

Personal factors encompass attributes such as sex, education, age, marital status, individual characteristics, family background, and socio-economic status.

Taking the social in-teraction perspective, workers' emotional regula-tion may lead to reactions by other people in interpersonal situations that then affect their own level of job satisfaction. For instance- The tendency of cumulative favorable reactions that follow expressions of positive feeling to enhance job satisfaction performance of emotional labor with desirable results in this respect could increase job satisfaction.

Management plays a crucial role in influencing workers and providing a sense of job satisfaction. Job satisfaction is a consequence of performance, affecting an organization's productivity efficiency. It forms opinions about the job and the organization, which boosts employee morale.

Organizational variables that contribute to job satisfaction To effectively assess job satisfaction among healthcare workers and its impact on absenteeism, it is essential to consider various factors such as occupational level, job content, considerate leadership, pay and promotional opportunities, and interactions within the work group. Each of these elements plays a crucial role in influencing employees' overall satisfaction and their attendance patterns. By examining these factors in detail, strategies can be proposed to enhance job satisfaction and reduce absenteeism. occupations have more prestige and power, leading to higher satisfaction levels. Job content is also influenced by occupational level, with greater variation in tasks and less repetitiveness. Considerate leadership leads to higher job satisfaction compared to inconsiderate leadership.

Job satisfaction is positively influenced by pay and promotional opportunities. Workgroup interaction is most satisfying when it allows for collaboration and positive engagement for the validation of other people's attitudes, acceptance by others, and easier achievement of goals. Personal variables like age, educational level, and sex also play a role in job satisfaction.

Emotional dissonance is a condition of conflict between public expressions of 'on-the-job' emotions and internal feelings, which is linked to high emotional exhaustion, low organizational commitment, and low job satisfaction. The social interaction model suggests that job satisfaction is influenced by various factors, including job content, considerate leadership, pay and promotion opportunities, and personal variables.

Job satisfaction is influenced by various factors, including educational level, turnover, absenteeism, and community conditions. High educational levels lead to a higher reference group for job rewards, while low job satisfaction increases labor turnover. Absenteeism has a negative correlation with job satisfaction and

turnover, as employees with low job satisfaction tend to remain absent.

Community conditions also play a role in job satisfaction, with poor conditions often reducing satisfaction and better conditions increasing it. Employees tend to be more satisfied when the 'way of life' in their job closely aligns with the values of the community they are part of.

Job satisfaction has three major effects:

on productivity, absenteeism, and turnover. While some argue that happy workers are productive, there is no direct relationship between happiness and productivity. However, organizations that evolve policies that make employees happy are likely to have improved productivity.

Productivity

Globalization, speed of machines, knowledge explosion, media impact, Promoting social awareness and setting high expectations for employees to meet social obligations are crucial for ensuring high levels of job satisfaction. These factors should be considered in industrial practices to ensure employee growth and organizational growth.

Absenteeism

There is an inverse relationship between job satisfaction and absenteeism: higher job satisfaction tends to result in lower absenteeism, whereas lower satisfaction is often associated with higher absenteeism. Moderating variables influencing this relationship include the availability of sick leave and the perceived importance of one's job.

Turnover

Employee satisfaction is a crucial factor in determining turnover rates. High satisfaction leads to low absenteeism, while low satisfaction results in high turnover. High performers in software engineering often face high turnover due to competition for personal growth. Organizations seek competent individuals for growth and retention, while poor performers may not leave due to lack of job opportunities.

Three main theories explain job satisfaction

content theory, process theory, and situational theories. Content theory posits that job satisfaction arises when an individual's needs for growth and self-actualization are fulfilled through their job. Process theory investigates job satisfaction by analyzing how well a job aligns with an individual's expectations and values. Situational theories propose that job satisfaction results from the interaction between an individual's personal characteristics and organizational attributes.

Content theory

Abraham Maslow's hierarchy of needs is one of the content theories, which consists of physiological needs, safety requirements, social needs, self-esteem needs, and self-actualization needs. Maslow's hierarchy suggests that a person's needs can be arranged in a logical sequence, with lower-level needs being fulfilled before higher-level needs.

In conclusion, job satisfaction is influenced by various factors, including employee performance, job satisfaction, and organizational characteristics. Understanding these factors can help organizations better manage and retain

their workforce.

Job satisfaction is influenced by factors such as the ability to meet higher-level needs and the satisfaction of employees. Frederick Hertzberg's two-continuum model of job satisfaction suggests that the work itself can be a principal source of satisfaction, with job dissatisfaction on a separate continuum. Hertzberg identified motivators as Intrinsic factors that influence satisfaction are linked to the fulfillment of higher-level needs, such as achievement, recognition, and opportunities for growth. On the other hand, hygiene factors, considered as extrinsic variables, include aspects like work conditions, pay, and interpersonal relationships.

Process theory

Process theories, such as Adams' and Vroom's, attempt to explain job satisfaction by examining expectancies and values. Adams' theory suggests that people perceive their job as a series of inputs and outcomes, with experience, ability, and effort as inputs and salary, recognition, and opportunity as outcomes. Vroom's theory of job satisfaction in 1964 added workers' expectations, stating that if employees receive less than they expect or feel unfairly treated, they may become dissatisfied. Overcompensation may also lead to dissatisfaction, as employees may experience feelings of guild.

In conclusion, job satisfaction is influenced by factors such as job satisfaction, expectancies, and values. The two continuum model of Hertzberg's Motivator-Hygiene theory and Adams' theory provide a framework for understanding job satisfaction and employee satisfaction.

Job satisfaction is a crucial factor in the workplace, influencing employee motivation, productivity, and overall performance. It is not just about money, but also about personal achievement, organizational status, and recognition.

Vroom's theory suggests that workers make decisions based on their perceived capability of performing tasks and receiving rewards. A three-variable equation is used to determine job satisfaction, with high expectancy, instrumentality, and valence indicating high satisfaction and motivation.

situational theory

Situational occurrences theory emerged in 1992, focusing on situational characteristics and occurrences. Situational characteristics include factors like pay, supervision, working conditions, promotional opportunities, and company policies. Situational occurrences are events that happen after a job is completed. These events can be either positive, such as receiving additional time off, or negative, like equipment failures or interpersonal conflicts.

Job satisfaction is crucial in the healthcare sector, as it impacts patient care, quality, and organizational effectiveness. High-quality care workers are more satisfied, leading to lower turnover rates, increased productivity, and efficiency. Organizations with low job satisfaction often experience burnout, poor productivity, and higher turnover rates, negatively impacting patient care and organizational performance.

This essay explores the importance of job satisfaction among health workers in a tertiary care hospital, focusing on factors such as fair compensation, a conducive working environment, and opportunities for professional growth. It also discusses the impact of job dissatisfaction on healthcare workers' well-being and patient care quality.

Absenteeism in healthcare

Absenteeism in healthcare is a significant issue, with various factors

influencing it, including job satisfaction. High levels of absenteeism can lead to an imbalance of workload, affecting productivity and patient care. Understanding job satisfaction and its relation to absenteeism can help develop strategies to reduce absenteeism and increase job satisfaction.

Healthcare workers, including doctors, nurses, administrative personnel, and supporting staff, are essential to the healthcare system's efficiency and effectiveness. High job satisfaction can lead to improved patient care, increased employee engagement, reduced turnover rates, and enhanced organizational performance. Conversely, low job satisfaction can result in understaffing, disrupted continuity of care, reduced productivity, and compromised patient safety.

Studies on job satisfaction and absenteeism can help organizations develop strategies to create a work environment that promotes contentment and reduces absenteeism rates. Factors such as workload, working conditions, relations with colleagues, appreciation, and remuneration can be considered to improve job satisfaction and absenteeism rates in healthcare settings.

Absenteeism is a significant issue in the workplace, affecting the care continuum, increasing workload, and operating costs. It can be influenced by factors such as job dissatisfaction, personal problems, and chronic medical conditions. Absenteeism can negatively impact an employee's reputation and long-term employability. Some absences are legally protected and can't be considered for termination. Absenteeism can be a result of vacations, illness, or family emergencies, and can be a problem for companies if the worker is consistently or unpredictably absent. It can also be a problem during busy times or as deadlines for large projects approach.

Some legally protected reasons for absence include disability leave, jury duty, and religious holidays. However, some employees may take advantage of their

employers while hiding behind laws meant to protect them. Norway has a high absenteeism rate, with an average percentage of absence around 6-7%. Norwegian workers enjoy comprehensive insurance covering all lost wages during absences. However, a Swedish study spanning 1955 to 1999 suggests a potential correlation between more generous sick leave benefits and a sustained increase in overall sick leave rates per employee.

A similar study in an Italian bank found that days of absence per week more than double once employment protection is granted, highlighting the importance of addressing absenteeism and ensuring a healthy work environment.

Absence and the economy are interconnected, with higher opportunity costs of not working reducing the likelihood of people being absent. Worker protection, increased unemployment rates, and reduced physical activity contribute to increased smoking and obesity. However, economic growth does not necessarily lead to increased sickness rates.

Substance abuse, alcohol, and diabetes are also contributing factors to increased absenteeism. High-risk drinkers are 22 times more likely to be absent from work and more prone to accidents, injuries, and illness. With over 40% of the workforce consuming risky alcohol, cost-effective targeted interventions are essential.

There are 4 Types of Absenteeism:

Types of Absenteeism

Absenteeism, the act of being absent from work, can be categorized as follows:

Authorized Absence

Employees who are absent from work with prior approval from their supervisor and a formal leave application are considered to have authorized absences. These absences are typically planned and accounted for in the organization's workforce planning.

Unauthorized Absence

Employees who are absent from work without informing their supervisor or submitting a leave application are considered to have unauthorized absences. This type of absence is generally unplanned and can disrupt workflow.

Willful Absence

Willful absence occurs when an employee intentionally chooses to be absent from work without a valid reason or justification. It is a deliberate disregard for organizational rules and responsibilities.

Uncontrollable Absence

Uncontrollable absences are those beyond an employee's control, such as illness, accidents, or family emergencies. These absences are typically supported by documentation and may qualify for paid or unpaid leave based on company policies.

Absenteeism HR policies

Absenteeism in the workplace can be reduced through various interventions and HR policies. These policies aim to increase the opportunity cost of not working, which is typically low when the cost of not working is high. However, when absenteeism is at a minimum level (<2%), most of these interventions will not make a difference.

One effective HR-absenteeism policy is hand washing, which significantly reduces absence during the flu season. Hanging signs on people to

wash their hands upon entering the office, using the restroom, or before lunch are simple yet effective interventions. Exercise frequency is also inversely related to absenteeism, with non-exercisers being 50% more at risk of becoming ill than those exercising three times weekly. Corporate wellness exercise programs can encourage people to exercise.

Workplace health promotion (WPH) is aimed at preventing illnesses and decreasing absenteeism, particularly among workers who share a condition. Employee Assistance Programs (EAPs) aim to reduce absenteeism and promote a healthy lifestyle. Health screenings for conditions like blood pressure, diabetes, and colorectal cancer are crucial for detecting problems before they become fatal to an employee's life.

Lastly, alcohol and other drug management policies, which include written prohibitions of smoking, alcohol, and/or drugs at work, may not be as effective in reducing employee substance use and/or absenteeism.

Drug testing is a common policy in some countries to reduce absenteeism, often cost-effective and reducing employee morale. Depression treatment can yield significant economic impacts, with an 8.2% increase in productivity and a 28.4% reduction in absenteeism over a 2-year study. Building organizational commitment and aligning with goals can also help reduce absenteeism. Rescheduling responsibilities and implementing absence verification systems can also help reduce absenteeism. Flexibility and autonomy are also important factors in reducing absenteeism.

Tertiary care hospitals

Tertiary care hospitals provide specialized consultative healthcare, often on referral from primary or secondary medical care personnel. The quality of the

working environment in these settings is high in complexity and intensity, impacting the satisfaction of healthcare workers. Understanding the factors influencing job satisfaction in tertiary settings is crucial for developing strategies for employee well-being and organizational performance improvement.

Job satisfaction among health workers in tertiary care hospitals can bring effective change in patient care quality and healthcare functioning. Understanding the factors determining job satisfaction in this demanding environment and how they influence absenteeism rates among health professionals is essential for developing strategies for employee well-being and organizational performance.

Healthcare workers often face high levels of stress due to the demanding work environment in tertiary care hospitals. Factors such as workload, work environment, relationships with coworkers and supervisors, career advancement opportunities, appreciation, and remuneration significantly impact job satisfaction. Satisfied healthcare professionals are motivated, engaged, and provide high-quality care to patients.

Absenteeism reductions due to job satisfaction are another positive outcome for the health workforce. A satisfied worker carries an attribution to their work with lower burnout rates and high morale, leading to low absenteeism. This study investigates the job satisfaction levels of healthcare workers within a tertiary care hospital, the factors influencing job satisfaction in a tertiary care setting, and the association of job satisfaction with absenteeism among healthcare professionals.

Identifying the factors leading to job satisfaction and implementing strategies to improve satisfaction levels can help hospitals reduce absenteeism, enhance employee retention, and contribute to improving patient care quality. Job

satisfaction is crucial in the healthcare sector, as it directly affects patient outcomes and affects individual healthcare workers and their organizations. Understanding the relationship between job satisfaction and absenteeism by healthcare workers is essential for better workforce management in the healthcare arena.

Job satisfaction significantly correlates with healthcare workers' absenteeism. Job satisfaction increases motivation and attracts mentally engaged employees, while dissatisfied employees are likely to burn out, stress, and disengage, leading to high absenteeism rates. Organizations can develop tailored interventions to support their workforce, enhancing employee welfare and patient care quality. This paper contributes valuable insights to healthcare leaders, policymakers, and researchers in developing more supportive work environments for healthcare professionals.

NEED FOR THE STUDY

The link between job satisfaction and absenteeism is recognized but lacks depth in understanding causality and mechanisms.

Key factors influencing job satisfaction include the workplace environment, job characteristics, compensation, and work-life balance. However, more research is needed to understand their interactions across organizational contexts. Methodological challenges include quantitative vs qualitative approaches, limited longitudinal studies, and sample representativeness. Closing these gaps can improve theoretical understanding and contribute to healthier workplaces.

Employee Well-being: Understanding job satisfaction levels can help identify factors that contribute to healthcare workers' overall well-being. Higher job satisfaction is often linked to lower stress levels and better mental health.

Workforce Retention: Job satisfaction is a key factor in retaining employees. High levels of job satisfaction can lead to lower turnover rates,

which is crucial in maintaining a stable and experienced healthcare workforce.

Quality of Patient Care: Satisfied healthcare workers are more likely to provide high-quality patient care. Their satisfaction can positively impact patient outcomes and overall satisfaction with the healthcare services they receive.

Cost Savings: High levels of absenteeism can result in increased costs for healthcare organizations due to the need for temporary staff, overtime pay, and decreased productivity. Understanding the factors that influence absenteeism can help reduce these costs.

Organizational Performance: Job satisfaction can influence organizational performance and effectiveness. Satisfied employees are often more engaged, productive, and committed to the organization's goals.

Policy and Management Implications: Findings from the study can inform policies and practices aimed at improving job satisfaction and reducing absenteeism among healthcare workers, leading to a more efficient and effective healthcare system.

AIM & OBJECTIVES

Aims

To assess the Job satisfaction among healthcare workers in tertiary care hospitals and the effect of satisfaction level on their absenteeism

Objectives

1. Assess job satisfaction levels among healthcare workers.

2. Investigate the relationship between job satisfaction and absenteeism in health care workers.

3. Propose strategies to improve job satisfaction and reduce absenteeism in health care workers.

REVIEW OF LITERATURE

Job satisfaction in healthcare workers greatly impacts quality, effectiveness, and work efficiency and at the same time on healthcare costs. Besides its importance for patients and the health care system, professional satisfaction in health care workers is directly connected with absence from work, human relations, and organization of work [1,2,3]. In a lot of countries, a job satisfaction survey is regularly conducted, and by monitoring obtained data it is possible to notice omissions in the organization of work. Healthcare workers face an increased risk of work discontent. Stress, burnout, and complex shift work are important determinants of healthcare workers well-being and they also influence their professional satisfaction. [4,5] Worldwide, studies showed that many factors impact job satisfaction in healthcare workers, such as gender, age, level of education, work experience, way of organization of work, working conditions, payment, working hours, promotions, etc. [6,7,8,9,10] Job satisfaction can affect employees' behavior, which, in turn, affects organizational functioning. As per the theory of ERG (Existence Relatedness Growth), humans have three sets of basic needs: existence, relatedness, and growth. [11] If attempts to satisfy needs with high priority are not fruitful, then the individual will focus on his demands that initially had a lower priority, which can lead to frustration and dissatisfaction. Therefore, satisfaction at work can be considered as a proxy indicator of emotional well-being or physiological health. It is also inversely associated with absenteeism, turnover in an organization, level of stress, and eventual exhaustion that ultimately improves productivity. [12] The quality of services is linked to the skills, motivation, and satisfaction of the workers providing the healthcare services. As per the World

Health Organization (WHO), there is a global concern for the shortage of human resources in health care. [13] Job dissatisfaction has been stated to be one of the significant and consistent predictors of intention to leave the job and migration of healthcare workers apart from other causes [14,15].

In recent research, it was found that employees with high levels of job satisfaction are less likely to be absent from work, leave the organization, have accidents at work, or experience employee stress, and as a result, show an increase in productivity rates [16]. Nguyen, Groth, and Johnson [17] found that there is a direct correlation between employee confidence and negative work behaviors such as absenteeism and lower job satisfaction.

The process absenteeism model of Steers and Rhodes [18] is affected by both the employees' motivation to attend work, as well as their ability to attend work.

In this model, Steers and Rhodes (1978) refer to this as voluntary and involuntary absenteeism, which is affected directly by job satisfaction. In line with this model, Langenhoff (2011) found

that employees who experience high levels of job satisfaction want to be at work and as a result, job satisfaction can predict lower levels of absenteeism. The absenteeism model of Nicholson (1977) was developed to predict absenteeism, but he notes that employee absenteeism is influenced by motivation and that there are different types of absenteeism. Overall, this model investigates factors such as job satisfaction that motivate employees to be at work (Bermingham, 2013).

Studies throughout history established that employee absenteeism is a significant problem in organizations worldwide. Some of these studies also indicated inconsistent findings on the strength of the relationship between employee absenteeism and job satisfaction, which gives the notion that this may be a moderated relationship rather than a direct one [19]. Sui (2002) determines that the relationship between employee absenteeism and job satisfaction is stronger under certain conditions. Such conditions may include substance use, supportive co-workers, and demographic variables [20].

1. Spector, P. E. (1997): Spector's work emphasizes the multifaceted nature of job satisfaction, highlighting that it encompasses various dimensions such as pay, promotion, supervision, fringe benefits, contingent rewards, operating procedures, coworkers, nature of work, and communication.

2. Schultz, D., & Schultz, S. E. (2010): This study suggests that job satisfaction significantly affects absenteeism. Employees with high job satisfaction are less likely to take unplanned leave, contributing to organizational efficiency.

3. Buchbinder, S. B., & Shanks, N. H. (2007): The authors discuss how job satisfaction among healthcare workers is crucial for organizational performance. They found that dissatisfied employees are more prone to absenteeism, which can disrupt patient care and increase operational costs.

4. Adams, A., & Bond, S. (2000): Their research on nursing staff found a strong correlation between job satisfaction and absenteeism, with satisfied nurses showing lower absenteeism rates. This study also highlighted the importance of management support and positive work environments.

5. Lu, H., While, A. E., & Barriball, K. L. (2005): This review of nursing literature indicated that job satisfaction is a key determinant of absenteeism. Factors like workload, professional relationships, and organizational support play significant roles in influencing job satisfaction.

6. Kane, P. P. (2009): Kane's study in a tertiary hospital setting found that job dissatisfaction due to workload, inadequate staffing, and lack of support leads to higher absenteeism rates among healthcare workers.

7. McHugh, M. D., & Stimpfel, A. W. (2012): This study highlights that job satisfaction among nurses is crucial for patient care outcomes and that high job satisfaction reduces absenteeism and turnover intentions.

8. Aiken, L. H., Clarke, S. P., & Sloane, D. M. (2002): Their research demonstrated that hospitals with better working conditions and higher job satisfaction among nurses have lower absenteeism rates, which translates into better patient care.

9. Tzeng, H. M. (2002): This study identified that job satisfaction directly

impacts nurses' absenteeism, with organizational support and a positive work environment being critical factors.

10. **Garcia, P. R. J. M., et al. (2019):** Garcia and colleagues found that job satisfaction mediates the relationship between workplace conditions and absenteeism, suggesting that improving job satisfaction can lead to reduced absenteeism among healthcare workers.

Factors Influencing Job Satisfaction in Healthcare Workers

Several factors influence job satisfaction among healthcare workers, including work environment, leadership style, workload, work-life balance, and professional development opportunities. A study by Lu et al. (2012) highlights the importance of a supportive work environment and good leadership in enhancing job satisfaction among nurses. Similarly, Aiken et al. (2012) found that lower nurse-to-patient ratios, which reduce workload, are associated with higher job satisfaction and better patient outcomes.

Personality and Learning Style

McManus et al. (2004) conducted a longitudinal study examining the role of personality and learning style in stress and burnout among UK medical graduates. They found that doctors' attitudes to work are significantly influenced by these factors, which in turn affect their job satisfaction and likelihood of experiencing burnout .

Stress and Burnout

Visser et al. (2003) studied Dutch medical specialists and identified a strong correlation between stress, satisfaction, and burnout. Their findings suggest that job satisfaction is inversely related to stress and burnout levels, with higher job satisfaction being associated with lower stress and burnout.

McManus et al. (2004) conducted a twelve-year longitudinal study on UK medical graduates, concluding that stress and burnout among doctors are influenced by personality and learning styles, which in turn affect their

attitudes toward work. Similarly, Visser et al. (2003) examined Dutch medical specialists and found a significant correlation between stress levels, job satisfaction, and burnout, highlighting the critical role of managing stress to improve job satisfaction.

Job Characteristics

Pousette and Hanse (2002) explored the impact of job characteristics on health and absenteeism across different occupational types. Their research indicates that unfavorable job characteristics can predict poor health outcomes and increased sickness absenteeism, highlighting the importance of job satisfaction in maintaining health and reducing absenteeism. Explored how job characteristics predict ill health and sickness absenteeism across different occupational types using a multigroup structural equation modeling approach. Their findings emphasized that adverse job characteristics lead to higher absenteeism rates, stressing the need for favorable job conditions to enhance job satisfaction.

Alcohol Consumption and Absenteeism

Bacharach et al. (2010) studied the moderating effect of the social use of alcohol on workplace absenteeism. Their research suggests that job satisfaction can mitigate the negative effects of alcohol consumption on absenteeism.

Motivation and Behavior Modification

Milkovich (2007) discussed the motivation of employees and behavior modification in healthcare organizations. Although in Serbian, the study underscores the importance of motivational strategies in improving job satisfaction and reducing absenteeism.

Gray-Toft and Anderson (1985) developed a model for diagnosing and predicting organizational stress in hospitals, which remains relevant in understanding the stressors affecting healthcare workers' satisfaction.

Motivation and Retention

Ojakaa et al. (2014) studied factors affecting the motivation and retention of primary healthcare workers in Kenya, emphasizing the need for motivational strategies to retain healthcare staff.

Dayrit et al. (2011) reviewed the progress in addressing the human resources for health crises, highlighting efforts to improve job satisfaction as a critical component.

Organizational Stress

Gray-Toft and Anderson (1985) developed a model for diagnosing and predicting organizational stress in hospitals. Their model underscores the significant impact of organizational stress on job satisfaction and absenteeism, emphasizing the need for effective stress management interventions.

Relationship Between Job Satisfaction and Absenteeism

Absenteeism in healthcare can lead to understaffing, increased workload for present employees, and potentially compromised patient care. Numerous studies have demonstrated a clear link between job satisfaction and absenteeism. For instance, Davey et al. (2009) found that job dissatisfaction is a significant predictor of absenteeism among nurses in the United States. Similar findings were reported by Roelen et al. (2008) in a study conducted in the Netherlands, where low job satisfaction was associated with higher rates of absenteeism among healthcare workers.

Professional and Patient Satisfaction

Haas et al. (2000) investigated the link between the professional satisfaction of general internists and patient satisfaction. Their study found that higher professional satisfaction among healthcare workers leads to better patient satisfaction, suggesting that job satisfaction can indirectly influence absenteeism through improved patient care.

Bovier and Perneger (2003) identified predictors of work satisfaction among

physicians, contributing to the understanding of factors that enhance job satisfaction in the medical field.

Predictors of Work Satisfaction

Bovier and Perneger (2003) identified various predictors of work satisfaction among physicians, including work environment, workload, and support from colleagues. These factors significantly affect job satisfaction and consequently impact absenteeism rates.

Job Satisfaction and Job Performance

Judge et al. (2001) conducted a qualitative and quantitative review of the job satisfaction-job performance relationship. Their findings suggest a positive correlation between job satisfaction and job performance, indicating that satisfied employees are less likely to be absent from work .

Kivimaki et al. (1994) identified contributors to satisfaction with management in hospital wards, highlighting the role of effective management in enhancing job satisfaction.

Satisfaction with Management

Kivimaki et al. (1994) examined contributors to satisfaction with management in hospital wards. They found that effective management practices contribute to higher job satisfaction, which in turn reduces absenteeism among healthcare workers.

Role Concepts and Expectations

Verschuren and Masselink (1997) studied the role concepts and expectations of physicians and nurses in hospitals. Clear role definitions and realistic expectations are crucial for job satisfaction and can help minimize absenteeism.

Bakotić (2016) studied the relationship between job satisfaction and organizational performance, finding that higher job satisfaction leads to

improved organizational outcomes.

Impact of Work Environment and Leadership

The work environment and leadership play pivotal roles in determining job satisfaction and absenteeism rates. A study by Van der Heijden et al. (2008) indicates that healthcare workers who perceive their work environment as supportive and their leaders as fair and motivating are less likely to be absent from work . This is supported by research from Ylitörmänen et al. (2019), which found that leadership styles that emphasize employee participation and support lead to higher job satisfaction and lower absenteeism.

Health and Well-being

Aazami et al. (2015) explored the relationship between job satisfaction and psychological/physical health among Malaysian working women, concluding that higher job satisfaction positively affects health outcomes. The World Health Organization (2014) reported on the global health workforce shortage, stressing the importance of job satisfaction in retaining healthcare workers.

Workload and Work-Life Balance

Excessive workload and poor work-life balance are significant contributors to job dissatisfaction and absenteeism. Carayon and Gurses (2008) highlight that high job demands and insufficient rest periods can lead to burnout and increased absenteeism among healthcare workers. Likewise, a study by Happell et al. (2013) found that mental health nurses who reported better work-life balance also reported higher job satisfaction and lower absenteeism rates.

Gender Differences and Job Satisfaction

Rast and Tourani (2012) evaluated job satisfaction and gender differences in the airline industry in Iran, providing valuable insights into the role of gender in job satisfaction across different sectors.

Nguyen et al. (2013) investigated the impact of emotional labor on

absenteeism, finding that emotional labor significantly affects absenteeism rates among healthcare workers.

Professional Relationships

The relationship between healthcare workers, including the dynamics between physicians and nurses, impacts job satisfaction. Verschuren and Masselink (1997) found that role concepts and expectations are critical in shaping job satisfaction among hospital staff.

Organizational Support and Management

Effective management and organizational support play crucial roles in enhancing job satisfaction. Kivimaki et al. (1994) and Bovier and Perneger (2003) found that supportive management practices and a positive organizational culture contribute to higher job satisfaction and lower absenteeism.

Employee Attendance

Steers and Rhodes (1978) developed a process model identifying major influences on employee attendance, offering a foundational framework for understanding absenteeism.

Scott and Mabes (1984) examined the job satisfaction/absenteeism relationship, identifying gender as a moderating variable in this dynamic.

Bacharach et al. (2010) studied the moderating effect of social support on the relationship between alcohol consumption and workplace absenteeism, emphasizing the role of social support in mitigating absenteeism.

Job satisfaction is a critical factor in healthcare settings, impacting not only employee well-being but also organizational performance and patient care quality. This review explores various dimensions of job satisfaction among healthcare workers, its determinants, and its effects on absenteeism. The literature spans across different healthcare contexts, including general internists, nurses, and specialists, and examines how job satisfaction correlates

with absenteeism rates.

Professional Development and Career Advancement

Opportunities for professional development and career advancement are also crucial for job satisfaction. A study by Kovner et al. (2006) found that nurses who had access to ongoing education and clear career progression pathways reported higher job satisfaction and lower absenteeism. This is corroborated by Laschinger et al. (2001), who found that empowerment and professional growth opportunities are key determinants of job satisfaction among healthcare workers.

Implications for Healthcare Management

Understanding the factors influencing job satisfaction and their impact on absenteeism can help healthcare managers develop strategies to enhance employee satisfaction and reduce absenteeism. For instance, creating a supportive work environment, ensuring reasonable workloads, providing opportunities for professional development, and adopting participatory leadership styles can significantly improve job satisfaction and reduce absenteeism.

Aazami et al. (2015) investigated the relationship between job satisfaction and psychological/physical health among Malaysian working women. Their research indicates that higher job satisfaction is associated with better psychological and physical health, which can reduce absenteeism.

Job Satisfaction Among Healthcare Workers and Its Effect on Absenteeism

Job satisfaction is a critical factor influencing the performance and well-being of healthcare workers. Satisfied employees are more likely to be productive, committed, and less likely to leave their jobs or be absent. This article examines the relationship between job satisfaction and absenteeism among

healthcare workers, drawing on previous research to provide a comprehensive overview.

Relationship between Job Satisfaction and Absenteeism

High job satisfaction leads to lower absenteeism rates, while low job satisfaction results in higher absenteeism. This relationship can be visualized in the following diagram:

Diagram1: Relationship Between Job Satisfaction and Absenteeism

[High Job Satisfaction]

↓

[Low Absenteeism]

↓

[Improved Patient Care]

↓

[Operational Efficiency]

Findings

The findings from the literature suggest that job satisfaction among healthcare workers is a significant predictor of absenteeism. Satisfied employees are less likely to take unplanned leave, which is essential for maintaining continuous patient care and reducing the operational burden on healthcare facilities.

Factors Influencing Job Satisfaction

1. Work Environment: A supportive and positive work environment significantly contributes to job satisfaction.

2. Compensation: Fair and competitive pay is crucial for maintaining job satisfaction.

3. Professional Development: Opportunities for growth and development enhance job satisfaction.

4. Work-Life Balance: Flexible work schedules and adequate rest periods contribute to higher job satisfaction.

5. Management Support: Effective leadership and support from management

play a crucial role in job satisfaction.

Key Factors Influencing Job Satisfaction

1. Work Environment and Leadership:

A supportive and positive work environment significantly contributes to job satisfaction. Studies by Lu, While, and Barriball (2005) and Van der Heijden et al. (2008) highlight the importance of management support and good leadership in enhancing job satisfaction among healthcare workers. Effective leadership that emphasizes employee participation and support leads to higher job satisfaction and lower absenteeism (Ylitörmänen et al., 2019).

2. Workload and Work-Life Balance:

Excessive workload and poor work-life balance are significant contributors to job dissatisfaction and absenteeism. Carayon and Gurses (2008) and Happell et al. (2013) emphasize that high job demands and insufficient rest periods can lead to burnout and increased absenteeism among healthcare workers. Ensuring reasonable workloads and promoting work-life balance are essential for improving job satisfaction and reducing absenteeism.

3. Compensation and Benefits:

Fair and competitive pay is crucial for maintaining job satisfaction. Studies by Schultz and Schultz (2010) and Adams and Bond (2000) indicate that adequate compensation and fringe benefits are vital components of job satisfaction. Healthcare organizations should ensure that their compensation packages are competitive to retain satisfied employees and reduce absenteeism.

4. Professional Development and Career Advancement:

Opportunities for professional development and career advancement are critical for job satisfaction. Kovner et al. (2006) and Laschinger et al. (2001) found

that nurses who have access to ongoing education and clear career progression pathways report higher job satisfaction and lower absenteeism. Providing opportunities for professional growth can enhance job satisfaction and reduce turnover intentions.

5. Interpersonal Relationships:

Positive interpersonal relationships with coworkers and supervisors contribute to job satisfaction. Aiken, Clarke, and Sloane (2002) and Tzeng (2002) found that supportive work relationships and effective communication are essential for maintaining high levels of job satisfaction among healthcare workers.

Relationship between Job Satisfaction and Absenteeism

High job satisfaction leads to lower absenteeism rates, while low job satisfaction results in higher absenteeism. Studies by Davey et al. (2009) and Roelen et al. (2008) demonstrate that job dissatisfaction is a significant predictor of absenteeism among healthcare workers. This relationship can be visualized as follows:

High Job Satisfaction leads to Low Absenteeism, which in turn leads to Improved Patient Care and Operational Efficiency.

Implications for Healthcare Management

Understanding the factors that influence job satisfaction and their impact on absenteeism can help healthcare managers develop strategies to enhance employee satisfaction and reduce absenteeism. Key strategies include:

1. Creating a Supportive Work Environment:

They foster a positive and supportive work environment where employees feel valued and respected.

2. Ensuring Reasonable Workloads:

It is implementing policies that ensure manageable workloads and prevent

burnout.

3. Providing Opportunities for Professional Development:

Offering continuous education and clear career advancement pathways.

4. Adopting Participatory Leadership Styles:

Encouraging leadership practices that involve employee participation and support.

5. Enhancing Compensation Packages:

Ensuring that compensation and benefits are competitive and fair.

Job satisfaction is a crucial factor in reducing employee absenteeism, according to various studies.[Stavros A. Drakopoulos and Aikaterini Grimani 2011]

Factors such as culture, leadership communication, commitment, job content, training, rewards, recognition opportunities, teamwork, superior-subordinate relationships, and delegation are all considered in job satisfaction. The study also emphasizes the importance of extrinsic sources of job satisfaction to motivate employees and reduce absenteeism.[Neeraj Kumari and Manav Rachna 2011].

The effectiveness of absenteeism is measured using stratified convenience sampling methods. [Thirulogasundaram and Sahu.P.C (2014].

There are moderate correlations between job satisfaction and the type of work, as well as between job satisfaction and workers' attitudes, values, and goals, such as job expectations. [Ramamoorthy and Rahul Kumar Shah 2017].

The study examines workplace absenteeism in the Hera Group, an Italian multi-utility leader in environmental, water, and energy services. It provides an overview of absenteeism data and explores solutions and discussions on absenteeism problems. [Maria Isabel Barreiro Ribeiro, António Jose 2019]

Various factors influence motivation and job satisfaction among employees of different age groups. [Federica Cucchiellaa, Massimo Gastaldi and Luigi Ranieri 2014]

The study indicates a positive relationship between the working environment and employee job satisfaction, and suggests that businesses need to recognize the importance of a good working environment for maximizing job satisfaction.[Rozman and Treven 2017]

The study also considers education, gender, hours worked per week, and occupation as variables. [Abdul Raziqa and Raheela Maulabakhsh 2015]

The individual-level relationship between employee involvement and job satisfaction is positive and significant. [Christopher D. Zatzick and Roderick D. Iverson 2011]

Employee satisfaction is completely related to an individual's physical and psychological well-being.[Naz, S., and Sharma 2017].

Job satisfaction is strongly linked to employee absenteeism, with various factors such as culture, leadership, communication, commitment, training, rewards, recognition opportunities, teamwork, superior-subordinate relationships, and delegation playing a significant role. [Stavros A. Drakopoulos and Aikaterini Grimani 2011].

A positive working environment is also linked to employee job satisfaction. The effectiveness of absenteeism is measured using stratified convenience sampling methods.[Neeraj Kumari and Manav Rachna 2011].

Job satisfaction is essential for employee motivation and can be influenced by the type of work, attitudes, values, and goals of workers. [Thirulogasundaram and Sahu.P.C (2014].

The Hera Group, an Italian multi-utility leader in environmental, water, and energy services, has been studied for its causes and management. [Maria Isabel Barreiro Ribeiro, António Jose 2019]

Factors influencing motivation and job satisfaction vary by age group.[Ramamoorthy and Rahul Kumar Shah 2017].

A positive relationship exists between the working environment and employee job satisfaction, and businesses need to recognize the importance of a good working environment for maximizing job satisfaction. [Abdul Raziqa and Raheela Maulabakhsh 2015

The individual-level relationship between employee involvement and job satisfaction is positive and significant. [Christopher D. Zatzick and Roderick D. Iverson 2011]

Job satisfaction is also related to an individual's physical and psychological well-being.[Naz, S., and Sharma 2017]

Mira Singh and Pestonjee's(1990), study found that job satisfaction is influenced by occupation, job involvement, and participation. The results confirmed the hypothesis and showed that job satisfaction was positively affected by occupational level, job involvement, and participation.

Balgir's 1991 study explored hygiene-motivational factors, revealing that job satisfaction, salary, job security, promotion chances, happy personal life, high position, and friendly social circle are motivating factors for Indian managers.

Matthew's 1991 study examined the relationship between satisfaction and organizational commitment, finding that satisfaction and commitment were reciprocally related, with the influence of satisfaction on commitment being stronger. Job satisfaction refers to personal feelings or beliefs related to work.Hanisch and Hulin (1991)

Absenteeism and withdrawal behaviors reflect invisible attitudes such as job dissatisfaction, low organizational commitment, or intention to quit. Zboril-Benson (2002)

Employees who are absent from work express negative attachment to the organization. As job dissatisfaction increases, self-reported absenteeism increases. (Blau & Boal, 1987)

High job satisfaction or strong commitment to the organization prevents withdrawal behaviors and maintains an attachment to work. As job satisfaction increases, absenteeism decreases. (Hackett & Guion, 1985; Taunton et al., 1989; 1995).

The relationship between job satisfaction and absenteeism has been a subject of debate among scholars. Some believe that job satisfaction is inversely related to absenteeism, while others argue that it is not directly related. Muchinsky (1977)

The main theoretical construct used to understand this relationship is "job withdrawal behavior," which suggests that individuals' job dissatisfaction and low work commitment reduce their motivation to attend work, leading to absenteeism. Johns (1978), Muchinsky (1977), Porter and Steers (1973)

This theory suggests that the effects of other job-related and organizational variables on absence would work their way through job satisfaction. (Adler& Golan, 1981).

However, recent meta-analyses have shown that absence behavior is more complex than a simple direct relationship, with several direct relationships also present.Steers and Rhodes (1978)

Critics argue that the withdrawal model focuses only on workers' attitudes and neglects dispositional and external factors such as absence cultures, organizational policies, and social factors. Most studies do not explicitly follow a theoretical framework focused on absenteeism. (Harrison & Martocchio, 1998), John (2001).

a negative relationship between job satisfaction and absenteeism. More satisfied employees are less likely to be absent, while more dissatisfied employees are more likely to be absent. Job satisfaction is the most significant predictor of absenteeism, and low job satisfaction can negatively impact an organization. Unit-level research generally shows negative relationships between satisfaction and absence, with a negative relationship found in recent studies. However, mixed results have been found when aggregating satisfaction and absence at the unit level. For example, Dineen et al. found that the relationship between job satisfaction and absenteeism was negative when dispersion was high, but the lowest when mean job satisfaction and dispersion were both low. Yebema et al. (2010) found that low job satisfaction could be an antecedent and a consequence of absenteeism, and Khurram et al. (2011)

found that job satisfaction significantly predicted employee absenteeism in public sector institutions in Pakistan.

Nurses in Canada face high rates of absenteeism, particularly in hospitals. Job satisfaction is a significant predictor of absenteeism, with studies showing that high work support and high demands can lead to lower absenteeism in rural-based nurses. Job satisfaction also mediates the relationship between organizational climate, role clarity, and intention to leave. A linear relationship exists between work distress and absenteeism, with higher levels of work distress leading to longer absences. Individual moral, quality of work life, job satisfaction, and individual distress contribute to organizational variables such as absenteeism and intention to leave. Davey et al. (2009) found that work attitudes and job satisfaction are predictors of short-term absenteeism in hospital settings, reducing nurse absenteeism.

Bridges (1980) found that job satisfaction is not a major contributor to teacher absenteeism, but there is evidence suggesting a strong relationship between job satisfaction and absenteeism. Job dissatisfaction in rural schools in the United States is closely linked to teacher absenteeism. Turner (2007) examined four large urban school systems in North Carolina and found that schools with high work system interdependence led to high job satisfaction and low employee absenteeism.

Akhtar, Hashmi and Naqvi (2010) surveyed 150 teachers from public and private educational settings and found that the majority of teachers were satisfied with their jobs. However, they did not conclude whether job satisfaction accounted for the number of absences. Emmanuel (2010) concluded that job satisfactions, meaningfulness of work, and job stress are major determinants of teacher absenteeism in Nigerian public primary schools.

Absenteeism is dependent on job satisfaction, defined as a general positive attitude towards one's job. High levels of job satisfaction may not necessarily result in a low rate of absenteeism, but low levels are more likely to increase

absenteeism. Further studies are needed to yield conclusive results on the relationship between job satisfaction and absenteeism in the teaching profession.

Job satisfaction encompasses various aspects such as pay, supervision, coworkers, work, and promotional opportunities. The primary incentive for employee satisfaction is monetary compensation, as employees feel they are being paid what they are worth. Recognition for hard work is also crucial for employee satisfaction. Job satisfaction is influenced by individual (intrinsic) and organizational (extrinsic) factors. Intrinsic satisfaction refers to satisfaction with the job itself, while extrinsic satisfaction is with external factors. A study by Punnett, Greenidge, and Ramsey (2007) found that satisfaction with co-workers is the most significant predictor of absenteeism. Both intrinsic and extrinsic factors, such as activity and responsibility, have a negative relationship with absenteeism, meaning that as these factors decrease, absenteeism increases.

acharach, Bamberger, and Biron (2010) suggest that researchers can better understand the relationship between alcohol consumption and absenteeism by focusing on the frequency of heavy drinking episodes. They found that employees with at least one heavy drinking episode in the past year have a higher rate of absenteeism. Absenteeism is a significant issue in western societies, and measuring it helps control payroll, benefits systems, workplace production, personnel costs, and address issues leading to high sick leave use. Most studies focus on illness and injury reasons, not substance use and absenteeism. Absenteeism negatively impacts colleagues and employers, affecting company profitability, productivity, service delivery, work ethic, labor relations, worker cooperation, and trust. Employees who use substances to cope with work pressure and low job satisfaction are at a higher risk for increased substance use. Factors such as an uncomfortable work environment, lack of safety, inadequate resources, poor supervision, peer problems, low salary, little training opportunities, job insecurity, and lack of career advancement can lead to decreased job satisfaction and depression.

Understanding the variables that predict employee substance consumption is crucial for numerous reasons, such as the higher availability of substances at the workplace and the inability to perform due to substance consumption. MacDonald's study confirmed that workplace substance use reduces an employee's ability to perform work and has a strong relationship with injuries and accidents. Recent research indicates that employees with high job satisfaction are less likely to be absent, leave the organization, have accidents, or experience stress, leading to increased productivity rates. Employee confidence is directly correlated with negative work behaviors such as absenteeism and lower job satisfaction. The process absenteeism model by Steers and Rhodes is affected by both employees' motivation and ability to attend work. Langenhoff (2011) found that employees with high job satisfaction want to be at work, predicting lower absenteeism levels. Nicholson (1977) also found that absenteeism is influenced by motivation and different types of absenteeism. Studies have consistently shown employee absenteeism is a significant problem in organizations worldwide. However, some studies have inconsistent findings, suggesting a moderated relationship rather than a direct one. The relationship between employee absenteeism and job satisfaction is stronger under certain conditions, such as substance use, supportive co-workers, and demographic variables.

Job satisfaction is the degree to which employees like their jobs and their different aspects, encompassing both positive and negative aspects. It is the employee's general attitude towards their job. The relationship between absenteeism and job satisfaction has been examined, as absenteeism is believed to be a way to deal with a stressful work environment. Higher job satisfaction is likely to result in decreased levels of employee absenteeism. Although there is not a strong relationship between job satisfaction and employee absenteeism, it does indeed predict absenteeism levels. Job satisfaction is a pleasurable or positive emotional state resulting from the appraisal of one's job or job experiences, influenced by personal feelings.

Schlemmer's study (2009) identifies job satisfaction as the extent to which

employees like their jobs, which is made up of intrinsic and extrinsic aspects. Intrinsic satisfaction refers to aspects related to job tasks, such as skills utilization, achievement, responsibility, recognition, and variety of tasks. Extrinsic satisfaction includes aspects not directly related to tasks, such as remuneration, working conditions, supervision, and interpersonal relationships. International research by Ogunleye, Odebiyi, and Olaoye (2013) identifies four factors determining job satisfaction: equitable rewards, supportive working conditions, mentally challenging work, and supportive colleagues. Studies have found that employee norms influence job satisfaction, absenteeism, and substance use. Theron (2014) emphasizes the importance of job satisfaction for both employers and employees, highlighting the negative consequences of poor job satisfaction, such as higher absenteeism rates, increased grievances, increased substance use, and more early retirements.

Job satisfaction can moderate employee absenteeism, influencing factors such as demographic variables, job characteristics, and substance use levels. Studies by Goldberg and Waldman, Thirulogasundaram and Sahu, Hausknecht, Hiller, and Vance, Josias (2005), and Chauke (2007) all support this finding. They found that a higher level of job satisfaction leads to a lower trend of absenteeism, while the opposite is true. The frequency of absences is more informative than the number of absent days. Chauke (2007) also found that employee motivation, which is subjective and influenced by factors like age, years of service, job satisfaction, work environment, family responsibilities, policies, attitudes, distance from home, values, and expectations, indirectly influences productivity and happiness at work.

The article presents a model combining Goldberg and Waldman's work and Lee and Ross's work, highlighting the moderating role of job satisfaction on absenteeism and substance use. The model suggests that employee variables influence absenteeism and substance use levels, and job satisfaction plays a significant role in these variables. Studies show a significant correlation between job satisfaction and substance use, with job satisfaction being a significant predictor of substance use. The model hypothesizes that high

substance consumption levels are positively related to absenteeism, job satisfaction predicts low levels of absenteeism, substance use levels determine absenteeism, and job satisfaction moderates these factors.

MATERIAL AND METHODS

Introduction

This chapter delves into the research design, specifying the sampling procedures, data collection instruments, and statistical methods employed to investigate the research problem. The sample for the present study was drawn from a department of doctors, nurses, and hospital workers The measuring instruments included a questionnaire with 11 sections: Demographic details, Job satisfaction, work environment, Job performance, Job expectations, Job satisfaction comparison, Job motivation, Job benefits and Perks, Job training and Development, Job stress and proposed strategies and implementation, and an Absenteeism.

This study aimed to assess job satisfaction among healthcare workers in tertiary care hospitals and examine its effect on absenteeism. The objectives included evaluating job satisfaction levels, investigating the relationship between job satisfaction and absenteeism, and proposing strategies to improve job satisfaction and reduce absenteeism. Job satisfaction among healthcare workers is a critical determinant of the quality and efficiency of healthcare delivery. In tertiary care hospitals, where the complexity and volume of cases are often high, the satisfaction of healthcare workers becomes even more significant. Job satisfaction encompasses various factors, including work environment, job security, interpersonal relationships, and personal fulfillment from work. A high level of job satisfaction can lead to improved performance, lower turnover rates, and better patient outcomes. Conversely, low job satisfaction may result in increased absenteeism, disrupting patient care, and increasing the workload on other staff members.

Absenteeism in healthcare settings is a multifaceted issue that can be influenced by job satisfaction. It is defined as the frequent or habitual absence from work,

which can negatively affect healthcare institutions, including increased operational costs, decreased productivity, and compromised patient care quality. Understanding the relationship between job satisfaction and absenteeism is crucial for developing strategies to enhance employee well-being and ensure the smooth functioning of healthcare facilities

Research Design

To comprehensively explore the factors influencing job satisfaction and its impact on absenteeism rates, this study will utilize a mixed-methods research design involving both quantitative and qualitative data collection among healthcare workers in tertiary care hospitals.This approach allows for a comprehensive understanding of the phenomena by integrating numerical data with detailed contextual information.

Sample Size and Population

The sample size for this study was determined to be 345 healthcare workers, including doctors, nurses, paramedical, and administrative staff. This sample size was calculated based on the Job satisfaction among healthcare workers in tertiary care hospitals and the effect of satisfaction level on their absenteeism. This sample size allowed for meaningful subgroup analyses and ensured that the study results would be generalizable to the broader population of healthcare workers in similar settings. Stratified random sampling was used to ensure representation from different departments and professional roles within the hospitals.

The study population consisted of healthcare workers employed at various Hospitals, including doctors, nurses, administrative staff, and support personnel.

Determining the Sample Size

The sample size for this study was determined based on several factors, including the research objectives, the population size of healthcare workers at the Hospitals, in Ghaziabad, and the statistical methods planned for data analysis.

Ensuring an adequate sample size was crucial to achieve sufficient statistical power and reliable results.

Population and Sampling Frame

The total population of healthcare workers at the Hospitals, which includes doctors, nurses, administrative staff, and support staff. A stratified random sampling method was used to ensure representation from all departments within the hospital.

Sample Size for Frequency in a Population

Population size(for finite population correction factor or fpc)(*N*):	1000000
Hypothesized % frequency of outcome factor in the population (*p*):	34%+/-5
Confidence limits as % of 100(absolute +/- %)(*d*):	5%
Design effect (for cluster surveys-*DEFF*):	1

Sample Size(*n*) for Various Confidence Levels

ConfidenceLevel(%)	Sample Size
95%	345
80%	148
90%	243
97%	423
99%	596
99.9%	971
99.99%	1358

Equation

Sample size $n = [DEFF*Np(1-p)]/ [(d^2/Z^2_{1-\alpha/2}*(N-1)+p*(1-p)]$

Results from OpenEpi, Version 3, open source calculator--SSPropor
Print from the browser with ctrl-P
or select text to copy and paste to other programs.

However, due to practical constraints and the high response rate expected from internal staff, a final sample size of 345 was deemed sufficient and manageable for detailed analysis while still providing adequate statistical power.

Sampling Method

A stratified random sampling technique was employed to ensure that all subgroups within the hospital's workforce were adequately represented. This

method involved:

1. **Stratification:** Dividing the healthcare workers into strata based on their roles (doctors, nurses, administrative staff, and support staff).
2. **Random Sampling within Strata:** Randomly selecting participants from each stratum Inclusion and Exclusion Criteria

To ensure the relevance and reliability of the data, specific inclusion and exclusion criteria were established:

Recruitment Process

Participants were recruited through internal communications at the hospital, including emails and notices in common areas. The recruitment process ensured that all eligible healthcare workers were informed about the study and allowed to participate.

Data Collection Methods

The data collection for this study on job satisfaction among healthcare workers and its effect on absenteeism involved both quantitative and qualitative methods to capture a comprehensive view of the research problem. This section outlines the specific instruments, procedures, and protocols used for data collection.

Quantitative Data Collection

Survey Instrument

A structured questionnaire was developed to assess job satisfaction and absenteeism among healthcare workers. The questionnaire included sections on demographic information, job satisfaction, and absenteeism records.

• **Demographic Information:** Age, gender, department, years of experience, job title, and educational background.

• **Job Satisfaction:** To measure employee job satisfaction, the Job Satisfaction Survey (JSS) was administered. This validated instrument assesses nine key work aspects using a 36-item Likert scale. Respondents rated their level of agreement with statements about pay, promotion opportunities, supervision, benefits, performance-based rewards, work conditions, coworker relations, job

tasks, and communication on a scale of 1 (strongly dissatisfied) to 5 (strongly satisfied).

• **Absenteeism Records:** Data on absenteeism were collected from the hospital's Human Resources (HR) department, including the number of days absent and reasons for absenteeism over the past year.

Procedure

• **Distribution:** The questionnaire was distributed to participants during their work hours. Specific distribution points included nurse stations, administrative offices, and break rooms.

• **Instructions:** Participants were provided with clear instructions on how to complete the questionnaire and were informed about the voluntary nature of their participation.

• **Collection:** Completed questionnaires were collected within two weeks through designated drop-off points or collected by the researcher directly.

Qualitative Data Collection

Interviews

Semi-structured interviews were conducted with a subset of 30 participants from the original sample to gain deeper insights into the factors influencing job satisfaction and absenteeism. The qualitative component aimed to complement the quantitative findings and provide a richer understanding of the participants' experiences.

• **Interview Guide:** An interview protocol designed to balance consistency with participant autonomy. A structured interview approach that provides a foundation for exploration. A standardized interview guide that fosters rich and varied responses.The guide included questions on:

o Personal experiences and satisfaction with various aspects of their job.

o Perceptions of workplace environment and relationships with colleagues and supervisors.

o Reasons for absenteeism and how job satisfaction influences their attendance.

o Suggestions for improving job satisfaction and reducing absenteeism.

Procedure

• **Recruitment:** Participants for the interviews were selected using purposive sampling from those who completed the questionnaire and indicated their willingness to participate in further research.

• **Scheduling:** Interviews were scheduled at convenient times for participants to minimize disruption to their work schedules.

• **Conducting Interviews:** Interviews were conducted in a private setting within the hospital premises to ensure confidentiality and comfort. Each interview lasted approximately 15 minutes.

• **Transcription:** With participants' consent, interviews were subsequently transcribed verbatim for analysis.

Inclusion and Exclusion criteria

Inclusion Criteria:

Full-time employees from diverse departments.

Those with a minimum of one year of service in the organization.

Exclusion Criteria:

Part-time or temporary workers.

Employees currently on extended leave or in a transitional role.

Data Collection Methods

Data were collected using a structured questionnaire developed specifically for this study. The questionnaire was distributed to the healthcare workers, who were asked to complete it voluntarily. The completed questionnaires were then collected and analyzed by the researcher. To ensure a high response rate, the questionnaire was converted into a Google form, reminders were sent, and data

collection was done in coordination with the department heads to facilitate participation.

The study employed both quantitative and qualitative data collection methods to gather comprehensive information on job satisfaction and absenteeism.

1. Quantitative Data Collection:

Questionnaires: A structured questionnaire was administered to all participants to collect data on job satisfaction levels and absenteeism rates. The questionnaire included Likert scale items to measure various dimensions of job satisfaction (e.g., work environment, pay, job autonomy) and frequency of absenteeism.

Absenteeism Records: Attendance records from the hospital's human resources department were reviewed to obtain objective data on absenteeism rates.

2. Qualitative Data Collection:

Interviews: Semi-structured interviews were conducted with a subset of participants to gain deeper insights into the factors influencing job satisfaction and the reasons behind absenteeism. The interview guide included close-ended questions to explore personal experiences and perceptions.

Data Analysis

Data analysis was conducted in two phases: quantitative and qualitative.

1. Quantitative Analysis:

Descriptive Statistics: Frequencies, means, and standard deviations were calculated to describe the sample characteristics and job satisfaction levels.

Inferential Statistics: Pearson correlation and multiple regression analysis were used to examine the relationship between job satisfaction and absenteeism. SPSS software was used for statistical analysis.

2. Qualitative Analysis:

Thematic Analysis: Interview transcripts were analyzed using thematic analysis

to identify common themes and patterns related to job satisfaction and absenteeism. NVivo software was used to assist in coding and organizing qualitative data.

Questionnaire Development and Validation Process

Questionnaire Development

The questionnaire for this study was meticulously developed to ensure it effectively captured relevant data on job satisfaction and absenteeism among healthcare workers. The development process included the following steps:

Literature Review

A comprehensive review of existing literature on job satisfaction and absenteeism in healthcare settings was conducted to identify key variables and validated instruments. The review guided the selection of the Job Satisfaction Survey (JSS) and informed the development of additional questions specific to this study.

Selection of the Job Satisfaction Survey (JSS)

The JSS was chosen for its extensive validation and reliability in measuring job satisfaction across various dimensions. The JSS includes 36 items divided into nine subscales:

- Pay
- Promotion
- Supervision
- Fringe Benefits
- Contingent Rewards
- Operating Conditions
- Coworkers

- Nature of Work
- Communication

Each item is rated on a Likert scale from 1 (strongly dissatisfied) to 5 (strongly satisfied), providing a comprehensive measure of job satisfaction.

Expert Review

The initial draft of the questionnaire was reviewed by a panel of experts, including healthcare administrators, HR professionals, and academic researchers. Their feedback ensured that the questions were Relevant, Representativeness, Clarity, Comprehensive, and Suggestions.

Validation Process

Correlation testing

Correlation testing for questionnaire validation is a crucial step in the development of reliable and valid instruments for research. It involves assessing the relationships between items within a questionnaire to determine their consistency and overall construct validity.

Purpose of Correlation Testing

Internal Consistency: To ensure that all items on a questionnaire measure the same construct.

Construct Validity: To confirm that the questionnaire accurately measures the theoretical construct it is intended to assess.

Reliability: To verify that the questionnaire produces stable and consistent results over time.

If the p-value is less than the alpha-value means level of significance i.e., $p<0.05$, then it is statistically significant.

If the calculated value is greater than the tabulated/critical value then it indicates that the question is valid.

Expert Consultations

The panel provided valuable input on the relevance, clarity, comprehensiveness and representativeness of the questions. Their feedback was instrumental in refining the questionnaire items to ensure they accurately captured the constructs of interest. They reviewed every question thoroughly and gave suggestions for improvement. As a result of this procedure, 5 questions were eliminated due to the lack of relevance and representativeness and then improvements were made in the questionnaire. While doing validation, the tool used by the Statistician removed four questions from the developed questionnaires.

Removed questions

1. I am satisfied with the recognition I receive for my work
2. The overall work environment is conducive to job satisfaction
3. How would you rate your stress level at work
4. I feel that my job is emotionally demanding

Response Format:

A 1 to 5 Likert scale was employed to measure responses, allowing participants to indicate the frequency or intensity of their experiences. The scale range was-

1- Strongly dissatisfied

2- dissatisfied

3- Neutral

4- Satisfied

5- Strongly satisfied

providing a nuanced understanding of the prevalence and severity of job satisfaction and absenteeism rates among healthcare workers. This format allows for the quantification of attitudes, perceptions, and experiences related to job satisfaction and absenteeism rates among healthcare workers.

The questionnaire is prepared after reviewing the existing literature on job satisfaction among healthcare workers in a tertiary care hospital and the effect of satisfaction level on their absenteeism. Job satisfaction and absenteeism are considered while preparing the questionnaire; hence it is named as the job satisfaction and absenteeism Questionnaire (as mentioned in the annexures).

Following this, the tool is translated into Hindi language, making it a bilingual questionnaire.

Response Format: Likert scale is used in the questionnaire in order to collect responses.

Data Analysis

The data analysis for this study was designed to explore the relationship between job satisfaction and absenteeism among healthcare workers. Both quantitative and qualitative data were analyzed using appropriate statistical and thematic methods to provide a comprehensive understanding of the research problem.

Quantitative Data Analysis

Descriptive Statistics

Descriptive statistics were used to summarize the demographic characteristics of the sample and the key variables of interest. This included measures of central tendency (mean, median) and dispersion (standard deviation, range) for continuous variables, and frequencies and percentages for categorical variables.

• **Demographic Data:** Age, gender, department, years of experience, job title, and educational background.

• **Job Satisfaction Scores:** Mean scores and standard deviations for each of the nine subscales of the Job Satisfaction Survey (JSS) and the overall job satisfaction score.

• **Absenteeism Data:** Mean number of days absent and frequencies of different reasons for absenteeism.

Timeline

Month 1-2: write a protocol and Literature review and development of research instruments

Month 3-4: Developed the questionnaire and validation process by statistician

Month 5-7: Data collection

Month 8-9: Data analysis

Month 10-11: Interpretation of results and development of recommendations

Month 12: Writing and submission of the dissertation

Calculation Method: The sample size was calculated using the formula for sample size determination in survey research:

Rounding up, the final sample size was determined to be 345.

Therefore, a sample size of 345 healthcare workers was targeted to ensure sufficient data for analysis and reliable results. This sample was expected to provide a comprehensive representation of the different departments and professional roles within the hospital.

This detailed timeline ensured that each phase of the research was carefully planned and executed, allowing for thorough investigation and analysis of job satisfaction and its effect on absenteeism among healthcare workers in tertiary care hospitals.

Quantitative Data Collection

The data collection procedure was designed to gather comprehensive information on job satisfaction and absenteeism among healthcare workers at

Santosh Hospital, Ghaziabad. This procedure included both quantitative and qualitative methods to ensure a thorough understanding of the research objectives.

Preparation of Instruments:

A Likert scale questionnaire was developed to measure various facets of job satisfaction, such as pay, working conditions, relationship with supervisors, and opportunities for professional development.

The questionnaire was pilot-tested with a small group of healthcare workers (approximately 10 participants) to ensure clarity and reliability. Necessary adjustments were made based on the feedback.

Sampling:

Stratified random sampling was employed to ensure representation from different departments and professional roles within the hospital. This included doctors, nurses, administrative staff, and allied health professionals.

A total of 345 healthcare workers were selected to participate in the study.

Distribution of Questionnaires:

The questionnaires were distributed to the selected participants during staff meetings and through internal email systems to ensure a wide reach.

Participants were given detailed instructions on how to complete the questionnaire and were assured of the anonymity and confidentiality of their responses.

A reminder email was sent one week after the initial distribution to encourage participation.

Collection of Questionnaires:

Completed questionnaires were collected in secure drop boxes placed in strategic locations within the hospitals, such as staff rooms and administrative offices. Additionally, an option to submit completed questionnaires electronically was provided for convenience.

Qualitative Data Collection

Selection of Participants:

A subset of the sample (healthcare workers) was selected for in-depth semi-structured interviews. These participants were chosen based on their willingness to participate and to ensure a diverse representation from different departments and roles.

Development of Interview Guide:

An interview guide was developed, focusing on close-ended questions related to job satisfaction and absenteeism. The guide included questions on personal experiences, perceptions of the work environment, relationships with colleagues and supervisors, and factors influencing absenteeism.

Data Preparation:

Data Cleaning: The collected survey data were cleaned by checking for any missing or inconsistent responses. Missing data were handled using mean imputation for minor gaps and case-wise deletion for significant gaps.

Data Coding: The responses from the Likert scale questionnaires were coded numerically for ease of analysis (e.g., Strongly Dissatisfied = 1, Dissatisfied = 2, Neutral = 3, Satisfied= 4, Strongly satisfied= 5).

Descriptive Statistics:

Measures of Central Tendency: The mean, median, and mode were calculated for overall job satisfaction scores and absenteeism rates.

Measures of Dispersion: Standard deviation and variance were computed to

understand the spread and variability in job satisfaction and absenteeism data.

Qualitative Data Analysis

Thematic Analysis:

Identifying Themes: The initial codes were grouped into broader themes that represented recurring patterns in the data. Themes related to job satisfaction included work-life balance, recognition and rewards, professional growth, and organizational support.

Theme Validation: Themes were reviewed and refined to ensure they accurately represented the data. Discrepancies were resolved through discussion among the research team.

Integration with Quantitative Findings: The qualitative themes were compared with the quantitative results to provide a more comprehensive understanding of the factors affecting job satisfaction and absenteeism.

Ethical Considerations

Ethical Approval: Ethical approval for the study has been obtained from the Institutional Ethics Committee (IEC) (Lr. No.: SU/R/2024/1344[31]) of Santosh Deemed to be University, Ghaziabad, UP before starting.

Informed Consent: Written informed consent was obtained from all participants before they participated in the study. They were informed about the purpose of the study, their right to withdraw at any time, and how their data would be used.

Confidentiality: All collected data were anonymized to protect participants' identities. Data were stored securely, and access was restricted to the research team.

Data Management

Quantitative Data: Completed questionnaires were coded and entered into a statistical software package (e.g., SPSS) for analysis. Data were checked for

completeness and accuracy before analysis.

Qualitative Data: Interview transcripts were stored electronically in password-protected files. Thematic analysis was conducted using qualitative data analysis software to manage and analyze the data.

The data collection procedure was meticulously planned and executed to ensure the reliability and validity of the collected data. By combining quantitative and qualitative methods, the study aimed to provide a comprehensive understanding of job satisfaction and its effect on absenteeism among healthcare workers at Hospitals.

Quantitative Data Analysis

The data analysis aimed to assess job satisfaction levels among healthcare workers and determine the relationship between job satisfaction and absenteeism. Both quantitative and qualitative data were analyzed to provide a comprehensive understanding of the factors influencing job satisfaction and absenteeism.

1. Informed Consent

Explanation of Study Purpose: Participants were provided with detailed information about the purpose of the study, including its aims, objectives, and significance.

Voluntary Participation: Participants were informed that their participation was entirely voluntary, and they had the right to withdraw from the study at any point without any repercussions.

Consent Form: A written consent form was provided to each participant, clearly stating all necessary details about the study. Participants signed the form to indicate their informed consent.

2. Confidentiality

Anonymity of Participants: Measures were taken to ensure that the identities of the participants remained anonymous. Unique identification codes were used instead of names.

Secure Data Storage: All data collected, both quantitative and qualitative, were stored securely in password-protected files and locked cabinets. Access to the data was restricted to the research team only.

Data Use: Participants were informed that the data collected would be used solely for this research and would not be shared with any third parties without their explicit consent.

3. Privacy

Respect for Participants' Privacy: Interviews and surveys were conducted in a manner that respected the privacy of the participants. Private and quiet spaces were used for interviews to ensure confidentiality.

Non-Intrusive Questions: The questionnaire and interview questions were designed to be non-intrusive and respectful of participants' personal and professional boundaries.

4. Minimizing Harm

Emotional Well-being: The study was designed to minimize any potential emotional distress. Participants were informed that they could skip any questions they were uncomfortable answering.

Support Services: Participants were provided with information about support services available at the hospital in case they experienced any distress as a result of participating in the study.

5. Fair Treatment

Equal Opportunity to Participate: All eligible healthcare workers were given an equal opportunity to participate in the study, regardless of their role or department within the hospital.

No Coercion: There was no coercion or undue influence on the participants to take part in the study. Participation was entirely voluntary and based on informed consent.

6. Transparency and Honesty

Disclosure of Findings: Participants were informed that they would have access to the findings of the study upon its completion. A summary of the results was made available to them.

Honest Reporting: The research team committed to reporting the findings honestly and accurately, without any fabrication, falsification, or inappropriate data manipulation.

Expected Outcomes

This section outlines the anticipated findings and implications of the study on job satisfaction among healthcare workers in a tertiary care hospital and its effect on absenteeism.

1. Levels of Job Satisfaction

It is expected that the study will reveal varying levels of job satisfaction among healthcare workers, with certain facets such as pay, working conditions, and relationships with supervisors playing a significant role. The findings are likely to show:

High Job Satisfaction: Healthcare workers who feel adequately compensated, have favorable working conditions and maintain positive relationships with their supervisors.

Low Job Satisfaction: Among healthcare workers who feel underpaid, face challenging working conditions, or have strained relationships with their supervisors.

2. Relationship Between Job Satisfaction and Absenteeism

The study is expected to confirm a significant relationship between job satisfaction and absenteeism, with higher job satisfaction correlating with lower absenteeism rates. Specific outcomes may include:

Positive Correlation: Lower levels of job satisfaction will likely be associated with higher absenteeism rates, indicating that dissatisfaction with certain job aspects contributes to increased absences.

Negative Correlation: Conversely, higher levels of job satisfaction will be

associated with lower absenteeism rates, suggesting that satisfied employees are more likely to attend work regularly.

3. Insights from Qualitative Data

The qualitative data from interviews are expected to provide deeper insights into the reasons behind the observed levels of job satisfaction and absenteeism. Anticipated themes may include:

Work-Life Balance: Insights on how work-life balance impacts job satisfaction and absenteeism.

Professional Development: Views on opportunities for professional growth and its influence on job satisfaction.

Organizational Support: Perceptions of organizational support and its role in enhancing job satisfaction and reducing absenteeism.

4. Proposed Strategies

Based on the findings, the study is expected to propose several strategies to improve job satisfaction and reduce absenteeism among healthcare workers. These may include:

Improving Compensation and Benefits: Recommendations for competitive salaries and benefits to enhance job satisfaction.

Enhancing Working Conditions: Suggestions for improving the physical and psychological work environment.

S**trengthening Supervisory Relationships:** Training programs for supervisors to foster better relationships with their teams.

Promoting Work-Life Balance: Policies to support flexible working hours and better work-life balance.

Providing Professional Development Opportunities: Initiatives for continuous learning and career advancement.

5. Implications for Healthcare Management

The study's outcomes are expected to have several implications for healthcare management, including:

Policy Development: Informing policies aimed at improving job satisfaction and reducing absenteeism.

Organizational Change: Guiding organizational changes to create a more supportive and satisfying work environment.

Human Resource Practices: Enhancing HR practices related to recruitment, retention, and employee well-being.

Ethical considerations are paramount in conducting research, especially when it involves human participants. This study adhered to rigorous ethical standards to ensure the protection, respect, and dignity of all participants involved. The ethical considerations addressed in this study include informed consent, confidentiality, voluntary participation, risk and benefit assessment, and ethical approval.

Informed Consent

Informed consent is a foundational ethical requirement in research involving human subjects. For this study:

• **Information Sheet:** Participants were provided with an information sheet detailing the purpose of the study, procedures, potential risks and benefits, and their rights as participants. This included the right to withdraw from the study at any time without any penalty.

• **Consent Form:** Participants were required to sign a consent form indicating their voluntary agreement to participate in the study. The consent form was written in clear and simple language to ensure comprehension.

• **Explanation:** The researcher offered to explain the study and answer any questions participants had before they signed the consent form, ensuring they fully understood what participation entailed.

Confidentiality

Maintaining the confidentiality of participants' information is crucial to protect their privacy and ensure trust in the research process. Measures taken included:

• **Anonymization:** All data collected were anonymized to prevent the identification of individual participants. Unique codes were assigned to questionnaires and interview transcripts instead of names or other identifying information.

• **Secure Data Storage:** Physical data (e.g., completed questionnaires) were stored in a locked cabinet accessible only to the researcher. Digital data (e.g., electronic transcripts) were stored on a password-protected computer.

• **Data Access:** Access to the data was restricted to the researcher and authorized personnel involved in the study. Any sharing of data for academic purposes was done in aggregate form without revealing individual identities.

Voluntary Participation

Participation in this study was entirely voluntary, ensuring that:

• **No Coercion:** Participants were not subjected to any coercion or undue influence to participate in the study. They were free to decline participation without any repercussions.

• **Right to Withdraw:** Participants were informed that they could withdraw from the study at any point without any penalty or loss of benefits to which they were otherwise entitled.

• **No Incentives:** While small tokens of appreciation were provided, these were not intended as incentives to coerce participation but as a gesture of gratitude.

Risk and Benefit Assessment

A thorough assessment of potential risks and benefits was conducted to minimize harm and maximize the positive impact of the study:

• **Minimal Risk:** The study was classified as minimal risk, meaning that participants were not exposed to any risks greater than those encountered in their daily lives.

• **Psychological Comfort:** Considering the sensitive nature of job satisfaction and absenteeism, care was taken to ensure that participants felt comfortable and safe sharing their experiences. Interviews were conducted in a private setting to

ensure confidentiality and emotional comfort.

• **Benefits:** Participants were informed about the potential benefits of the study, including contributing to improved understanding and practices regarding job satisfaction and absenteeism, which could lead to better working conditions and policies.

PRESENTATION OF RESULTS

Introduction In this section the results of the empirical analysis are reported and presented. The presentation proceeds with an analysis of the descriptive statistics on the variables under consideration. The statistical program used for the analyses and presentation of data in this research is the Statistical Package for the Social Sciences (SPSS) version 12. The current chapter outlines the results obtained in the study and provides a comprehensive discussion of these results. The descriptive statistics computed for the study are presented first in an outline of the characteristics of the sample with regards to the variables included in the study.

The information provided and discussed in the previous chapters will serve as a background against which the contents of this chapter will be presented and interpreted.

Descriptive statistics

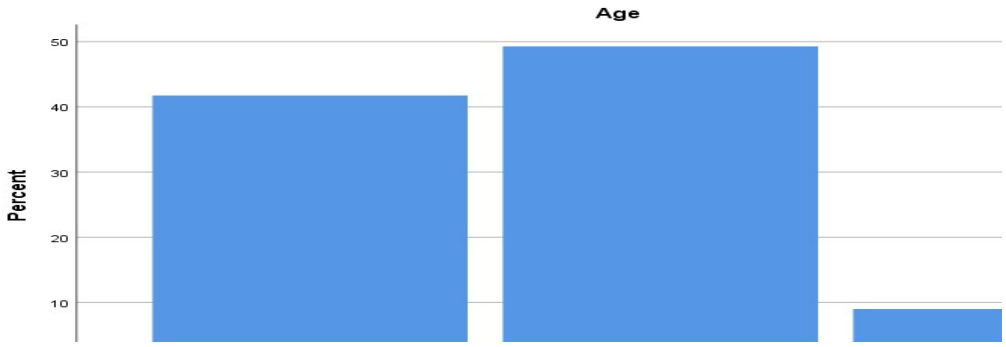
The descriptive statistics calculated for the sample are provided in the sections that follow. That is, the data about the variables included in the study, as collected by the measuring instruments Healthworks, are summarized using graphic representation and the calculation of descriptive measures. In this manner, the properties of the observed data emerge and an overall picture thereof is obtained.

Results of the biographical questionnaire

This section outlines the descriptive statistics calculated based on the variables included in the biographical questionnaire. The demographic variables that receive attention are Demographic details, Job satisfaction, work environment,

Job performance, Job expectations, Job satisfaction comparison, Job motivation, Job benefits and Perks, Job training and Development, Job stress, proposed strategies and implementation, and Absenteeism. Descriptive statistics, in the form of frequencies and percentages, are subsequently presented graphically for each of the above-mentioned variables.

The subjects' responses as regards their age are presented graphically in Figure and Table -



The bar graph shows the distribution of ages in a sample of 345 people. The x-axis (horizontal axis) shows the age range. The y-axis (vertical axis) shows the frequency, percent, valid percent, and cumulative percent of people in each age range.

The most frequent age range is 31-45 years old, with 170 people (49.3% of the sample).

The second most frequent age range is 18-30 years old, with 144 people (41.7% of the sample).

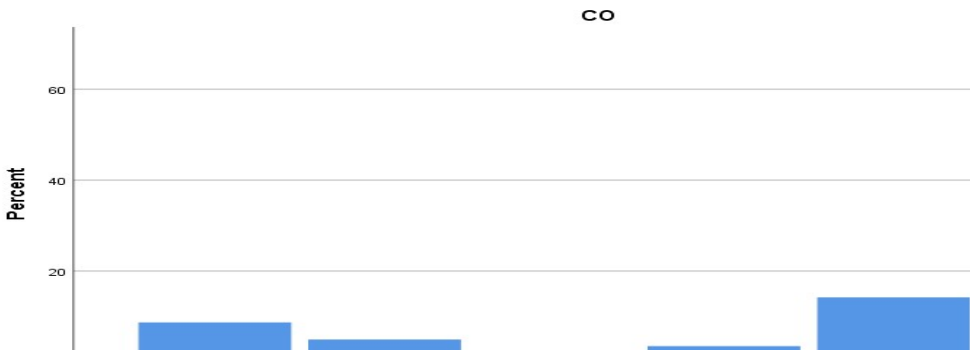
The least frequent age range is 51-65 years old, with 31 people (9.0% of the sample).

Here's a table summarizing the data:

Age

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	18-30	144	41.7	41.7	41.7
	31-45	170	49.3	49.3	91.0
	51-65	31	9.0	9.0	100.0
	Total	345	100.0	100.0	

The subjects' responses as regards their current organization are presented graphically in Figure and Table –



The bar graph shows the distribution of patients across six hospitals. The x-axis (horizontal axis) shows the hospital names. The y-axis (vertical axis) shows the frequency, percent, valid percent, and cumulative percent of patients at each hospital. The data shows that females make up a larger portion of the sample than males (204 females, 141 males). This means that there are 59.1% females and 40.9% males.

The largest number of healthcare workers (233, or 67.5% of the sample) are at Santosh Hospital.

The second most frequent hospital is Rama Hospital, with 49 patients (14.2% of the sample).

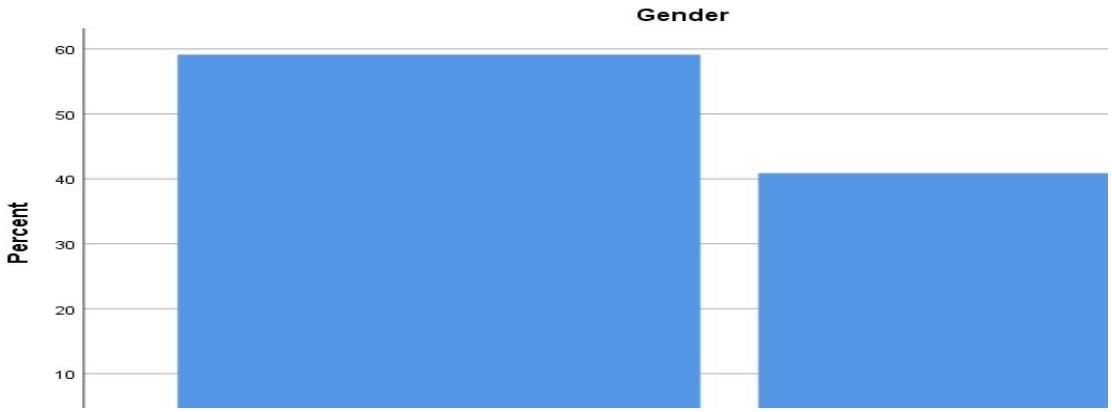
The remaining four hospitals (V Care Hospital, Fortis Hospital, GTB Hospital, and Max Hospital) have a combined total of 63 patients (18.3% of the sample). Among these four hospitals, Santosh Hospital has the most healthcare workers.

Here's a table summarizing the data:

CO

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	V care Hospital	30	8.7	8.7	8.7
	Fortis Hospital	17	4.9	4.9	13.6
	GTB Hospital	4	1.2	1.2	14.8
	Max Hospital	12	3.5	3.5	18.3
	Rama Hospital	49	14.2	14.2	32.5
	Santosh Hospital	233	67.5	67.5	100.0
	Total	345	100.0	100.0	

The subjects' responses as regards their Gender are presented graphically in Figure and Table –



The data shows that females make up a larger portion of the sample than males (204 females, 141 males). This means that there are 59.1% females and 40.9% males.

Here's a table summarizing the data:

Gender

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Female	204	59.1	59.1	59.1
	Male	141	40.9	40.9	100.0
	Total	345	100.0	100.0	

The subjects' responses as regards their Martial status are presented graphically in Figure and Table –

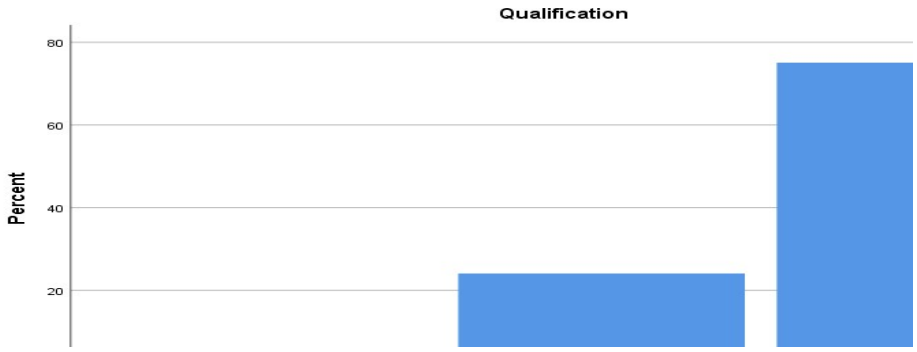
The data shows that in the sample, there is a higher frequency of married people (196) compared to unmarried people (149). This translates to 56.8% of the sample being married and 43.2% being unmarried.

Here's a table summarizing the data:

Ms

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Married	196	56.8	56.8	56.8
	Unmarried	149	43.2	43.2	100.0
	Total	345	100.0	100.0	

The subjects' responses as regards their Qualification are presented graphically in Figure and Table –



The bar graph shows the distribution of the highest qualification in your sample of 345 people. The x-axis (horizontal axis) shows the qualification level (12, PG, UG). The y-axis (vertical axis) shows the frequency, percent, valid percent, and cumulative percent of people with each qualification.

The highest qualification for the majority of the sample (75.1%, or 259 people) is UG (presumably undergraduate).

PG (presumably postgraduate) is the qualification for 24.1% of the sample (83 people).

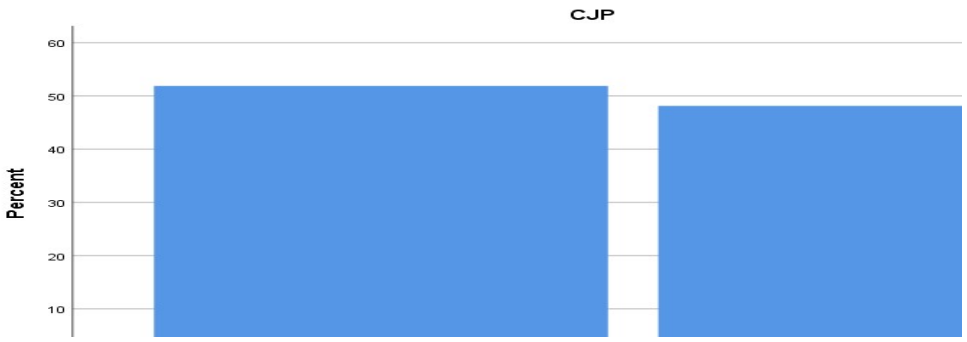
Only 3 people (0.9% of the sample) have a qualification level of 12 (unclear what this qualification level represents).

Here's a table summarizing the data:

Qualification

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	12	3	.9	.9	.9
	PG	83	24.1	24.1	24.9
	UG	259	75.1	75.1	100.0
	Total	345	100.0	100.0	

The subjects' responses as regards their current job profile are presented graphically in Figure and Table –



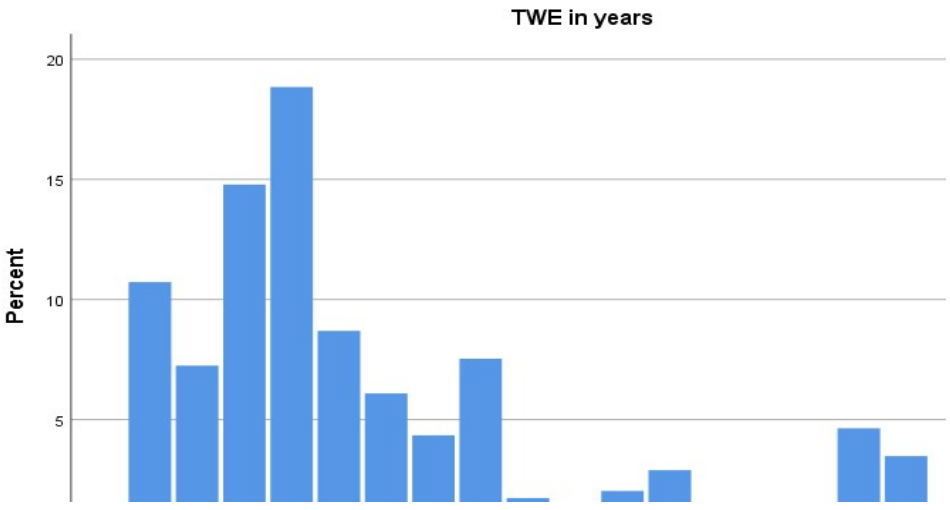
The data shows that in the sample, there is a nearly even split between people who have medical and non-medical job profiles (179 medical, 166 non-medical). This translates to 51.9% of the sample having medical professions and 48.1% having non-medical professions.

Here's a table summarizing the data:

CJP

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Medical	179	51.9	51.9	51.9
	Non Medical	166	48.1	48.1	100.0
	Total	345	100.0	100.0	

The subjects' responses as regards their Total work experience are presented graphically in Figure and Table –



The bar graph shows the distribution of work experience in years in a sample of 345 people. The x-axis (horizontal axis) shows the number of years of work experience. The y-axis (vertical axis) shows the frequency, percent, valid percent, and cumulative percent of people with that many years of experience.

The most frequent work experience level is 4 years, with 65 people (18.8% of the sample) having that many years of experience.

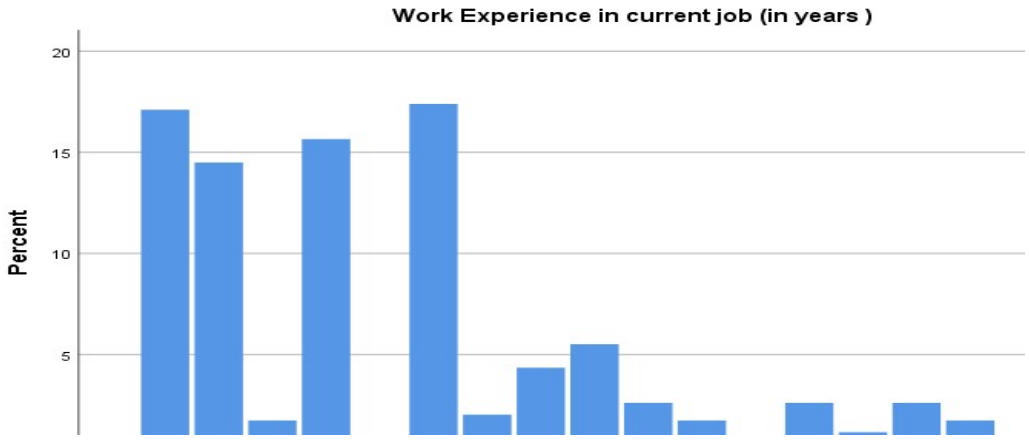
No single year of experience between 1 and 23 years has more than 65 people (18.8%) reporting it.

Here's a table summarizing the data:

TWE in years

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	37	10.7	10.7	10.7
	2	25	7.2	7.2	18.0
	3	51	14.8	14.8	32.8
	4	65	18.8	18.8	51.6
	5	30	8.7	8.7	60.3
	6	21	6.1	6.1	66.4
	7	15	4.3	4.3	70.7
	8	26	7.5	7.5	78.3
	9	6	1.7	1.7	80.0
	10	3	.9	.9	80.9
	11	7	2.0	2.0	82.9
	12	10	2.9	2.9	85.8
	14	3	.9	.9	86.7
	15	3	.9	.9	87.5
	17	3	.9	.9	88.4
	18	16	4.6	4.6	93.0
	19	12	3.5	3.5	96.5
	20	3	.9	.9	97.4
	22	3	.9	.9	98.3
	23	3	.9	.9	99.1
	27	3	.9	.9	100.0
	Total	345	100.0	100.0	

The subjects' responses as regards their current job are presented graphically in Figure and Table –



The bar graph shows the distribution of work experience in current jobs in a sample of 345 people. The x-axis (horizontal axis) shows the number of years of work experience in the current job. The y-axis (vertical axis) shows the frequency, percent, valid percent, and cumulative percent of people with that many years of experience.

The most frequent work experience level is 4 years, with 60 people (17.4% of the sample) having that many years of experience in their current job.

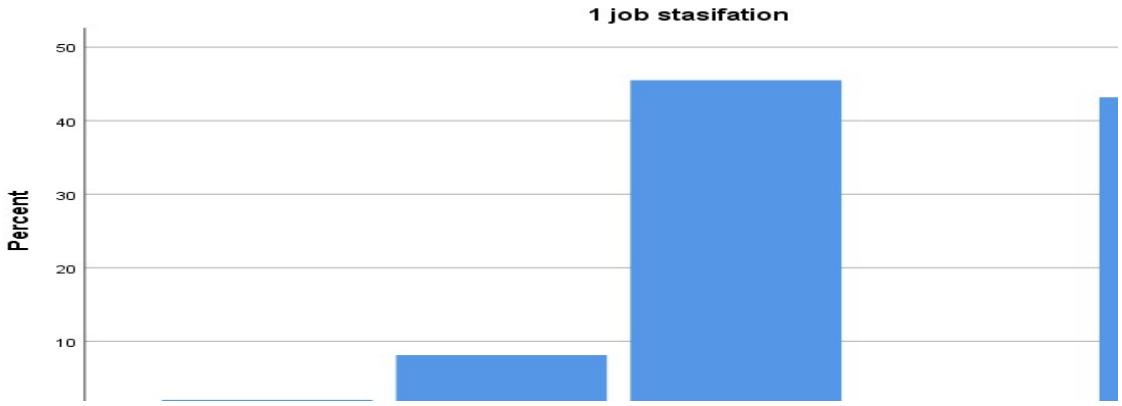
Work experience in current jobs is fairly evenly spread out across the range of years shown in the graph, with no single year having a significantly higher frequency than the next.

Here's a table summarizing the data:

Work Experience in current job (in years)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1.0	59	17.1	17.1	17.1
	2.0	50	14.5	14.5	31.6
	2.5	6	1.7	1.7	33.3
	3.0	54	15.7	15.7	49.0
	3.5	3	.9	.9	49.9
	4.0	60	17.4	17.4	67.2
	5.0	7	2.0	2.0	69.3
	6.0	15	4.3	4.3	73.6
	7.0	19	5.5	5.5	79.1
	8.0	9	2.6	2.6	81.7
	9.0	6	1.7	1.7	83.5
	10.0	3	.9	.9	84.3
	12.0	9	2.6	2.6	87.0
	13.0	4	1.2	1.2	88.1
	16.0	9	2.6	2.6	90.7
	17.0	6	1.7	1.7	92.5
	18.0	3	.9	.9	93.3
	19.0	13	3.8	3.8	97.1
	20.0	3	.9	.9	98.0
	24.0	7	2.0	2.0	100.0
	Total	345	100.0	100.0	

The subjects' responses as regards their job satisfaction in their current job are presented graphically in Figure and Table –



The bar graph shows the distribution of job satisfaction in a sample of 345 people. The x-axis (horizontal axis) shows the level of job satisfaction. The y-axis (vertical axis) shows the frequency, percent, valid percent, and cumulative percent of people reporting that level of job satisfaction.

The largest group of respondents (149 or 43.2%) reported being strongly satisfied with their current jobs.

The second largest group (157 or 45.5%) reported being satisfied with their current jobs.

A smaller percentage of respondents reported feeling dissatisfied (7 or 2.0%), neutral (28 or 8.1%), or strongly dissatisfied (4 or 1.2%) with their current jobs.

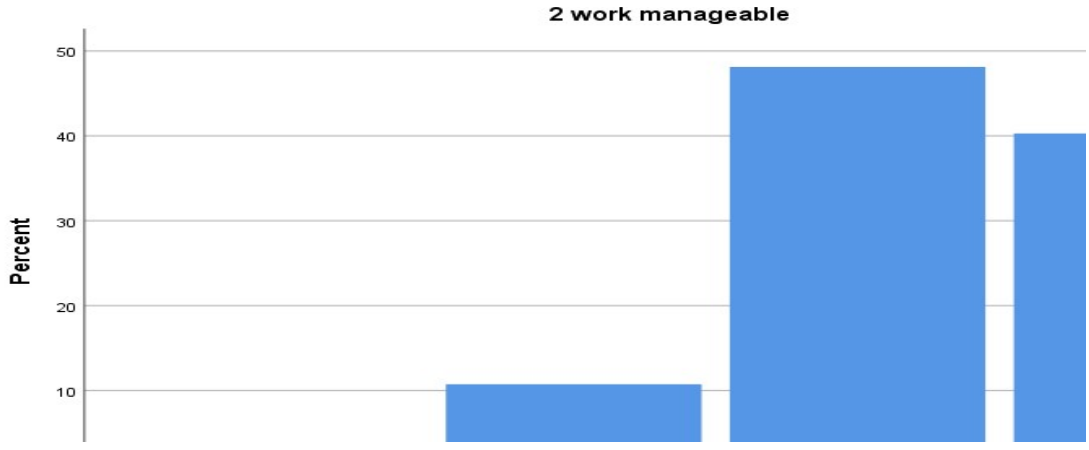
Here's a table summarizing the data:

1 job stasifation

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	7	2.0	2.0	2.0
	Neutral	28	8.1	8.1	10.1
	Satisfied	157	45.5	45.5	55.7
	Strongly Dissatisfied	4	1.2	1.2	56.8
	Strongly Satisfied	149	43.2	43.2	100.0
	Total	345	100.0	100.0	

According to the research, healthcare workers are satisfied with their current jobs.

The subjects' responses as regards their workload is manageable are presented graphically in Figure and Table –



The bar graph shows the distribution of responses to a survey question about healthcare workers feel that workload is manageable in their job.

40.3% of respondents said they were strongly satisfied that the workload was manageable in their jobs.

48.1% of respondents said they were satisfied that the workload was manageable in their jobs.

10.7% of respondents said they were neutral that the workload was manageable in their jobs.

0.9% of respondents said they were dissatisfied that the workload was manageable in their jobs.

In total, 88.4% of respondents said they were satisfied or strongly satisfied that the workload was manageable in their jobs.

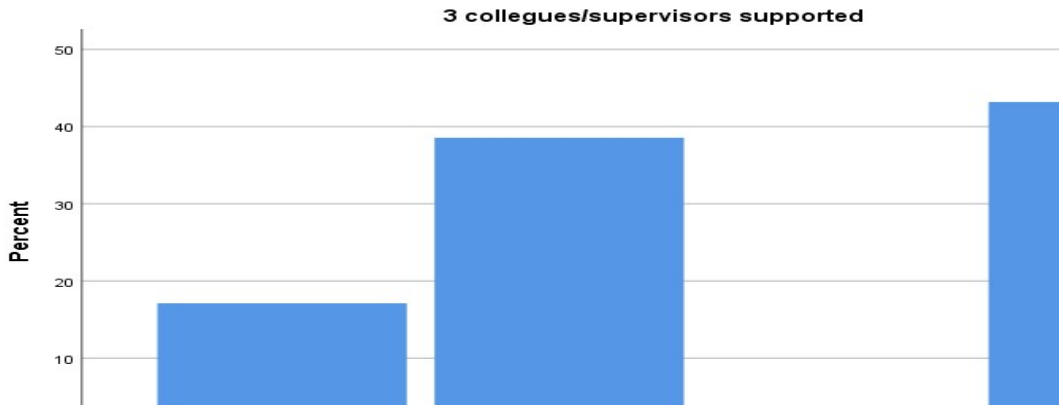
Here's a table summarizing the data:

2 work manageable

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	3	.9	.9	.9
	Neutral	37	10.7	10.7	11.6
	Satisfied	166	48.1	48.1	59.7
	Strongly Satisfied	139	40.3	40.3	100.0
	Total	345	100.0	100.0	

According to the research, healthcare workers are satisfied that the workload is manageable in their jobs.

The subjects' responses as regards how they feel supported by colleagues and supervisors are presented graphically in Figure and Table –



The image is a bar graph that shows the results of a survey question they felt supported by colleagues and supervisors.

43.2% of respondents said they were strongly satisfied that they felt supported by colleagues and supervisors.

38.6% of respondents said they were satisfied that they felt supported by colleagues and supervisors.

17.1% of respondents said they were neutral that they felt supported by colleagues and supervisors.

1.2% of respondents said they were strongly dissatisfied that they felt supported by colleagues and supervisors.

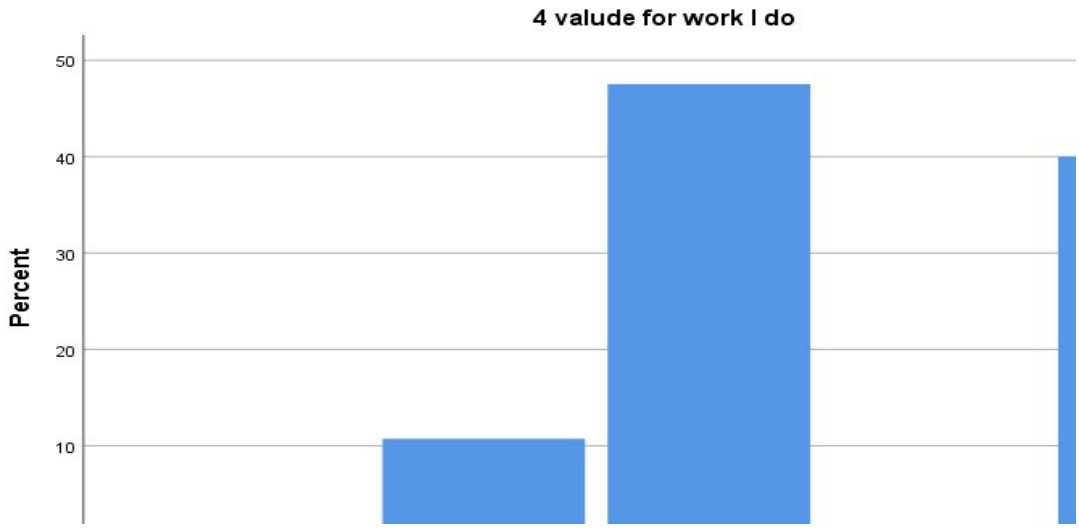
Here's a table summarizing the data:

3 collegues/supervisors supported

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Neutral	59	17.1	17.1	17.1
	Satisfied	133	38.6	38.6	55.7
	Strongly Dissatisfied	4	1.2	1.2	56.8
	Strongly Satisfied	149	43.2	43.2	100.0
	Total	345	100.0	100.0	

According to the research, healthcare workers are strongly satisfied and feel supported by colleagues and supervisors.

The subjects' responses as regards how they feel valued for the work they do are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about how much healthcare workers value the work they do in their jobs.

- 40.0% of respondents said they were strongly satisfied with the value of the work they do in their jobs.
- 47.5% of respondents said they were satisfied with the value of the work they do in their jobs.
- 10.7% of respondents said they were neutral about the value of the work they do in their jobs.
- 0.9% of respondents said they were dissatisfied with the value of the work they do in their jobs.

In total, 87.5% of respondents said they were satisfied or strongly satisfied with the value of the work they do in their jobs.

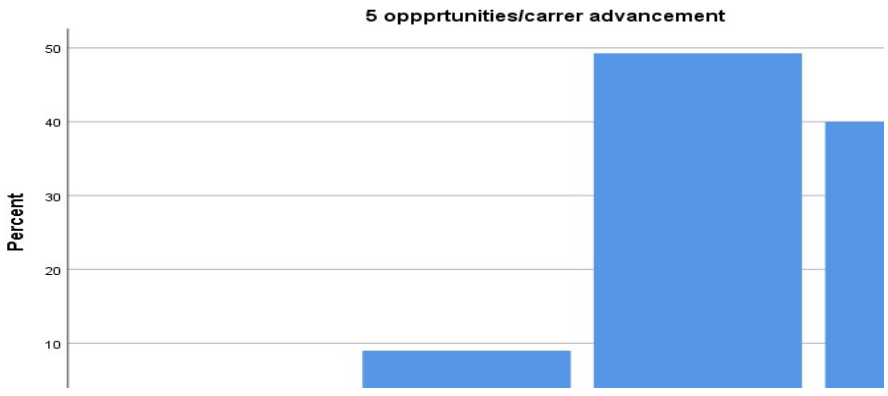
Here's a table summarizing the data:

4 valude for work I do

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	3	.9	.9	.9
	Neutral	37	10.7	10.7	11.6
	Satisfied	164	47.5	47.5	59.1
	Strongly Dissatisfied	3	.9	.9	60.0
	Strongly Satisfied	138	40.0	40.0	100.0
	Total	345	100.0	100.0	

According to the research, healthcare workers are satisfied with the value of the work they do in their jobs.

The subjects' responses as regards whether they have enough opportunities for career advancement in their current job are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about whether they have enough opportunities for career advancement in their current job.

- 40.0% of respondents said they were strongly satisfied with the opportunities for career advancement in their current job.
- 49.3% of respondents said they were satisfied with the opportunities for career advancement in their current job.
- 9.0% of respondents said they were neutral about the opportunities for career advancement in their current job.
- 1.7% of respondents said they were dissatisfied with the opportunities for career advancement in their current job.
-

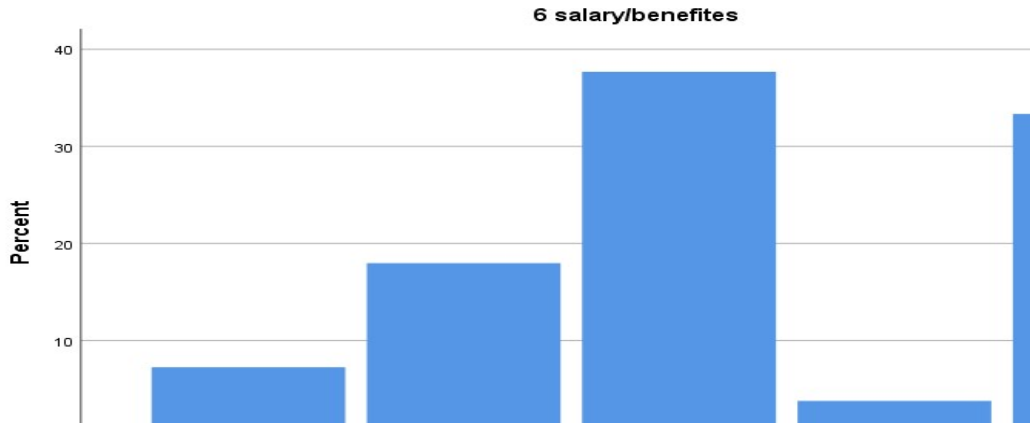
Here's a table summarizing the data:

5 oppprtunities/carrer advancement

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	6	1.7	1.7	1.7
	Neutral	31	9.0	9.0	10.7
	Satisfied	170	49.3	49.3	60.0
	Strongly Satisfied	138	40.0	40.0	100.0
	Total	345	100.0	100.0	

- In total, 89.3% of respondents said they were satisfied or strongly satisfied with the opportunities for career advancement in their current job.

The subjects' responses as regards whether they have enough opportunities for career advancement in their current job are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about whether they are satisfied with the salary and benefits.

- 33.3% of respondents said they were strongly satisfied with their salary and benefits.
- 37.7% of respondents said they were satisfied with their salary and benefits.
- 18.0% of respondents said they were neutral about their salary and benefits.
- 7.2% of respondents said they were dissatisfied with their salary and benefits.
- 3.8% of respondents said they were strongly dissatisfied with their salary and benefits.

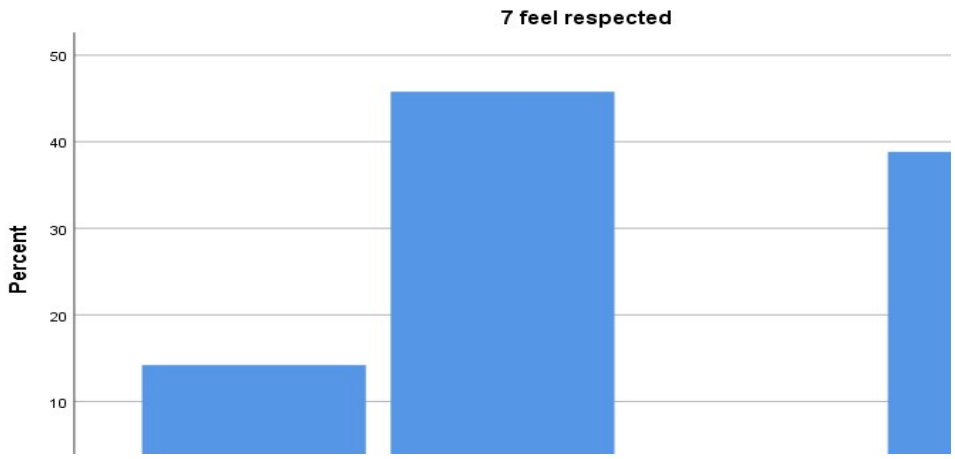
Here's a table summarizing the data:

6 salary/benefites

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	25	7.2	7.2	7.2
	Neutral	62	18.0	18.0	25.2
	Satisfied	130	37.7	37.7	62.9
	Strongly Dissatisfied	13	3.8	3.8	66.7
	Strongly Satisfied	115	33.3	33.3	100.0
	Total	345	100.0	100.0	

In total, 71% of respondents said they were satisfied or strongly satisfied with the salary and benefits.

The subjects' responses as regards whether they feel respected by my superiors are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about they feel respected by my superiors.

- 38.8% of respondents said they felt strongly satisfied.
- 45.8% of respondents said they were satisfied.
- 14.2% of respondents said they were neutral.
- 1.2% of respondents said they were strongly dissatisfied.
- 1.2% of respondents said they were dissatisfied.

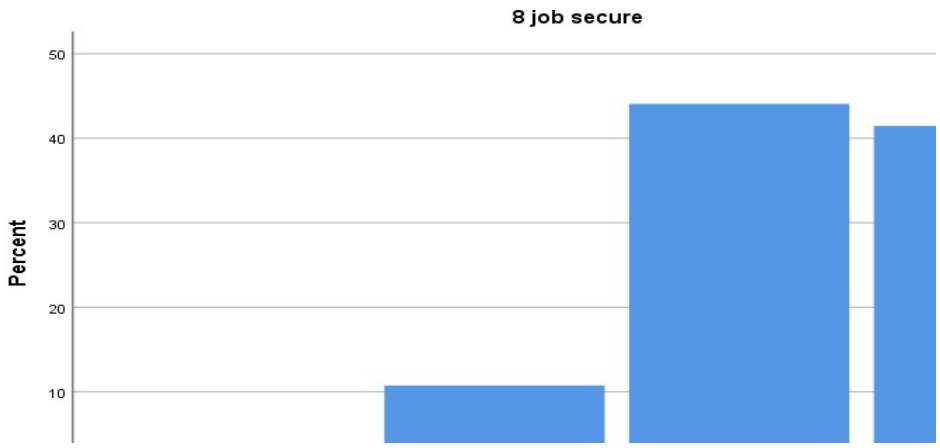
Here's a table summarizing the data:

7 feel respected

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Neutral	49	14.2	14.2	14.2
	Satisfied	158	45.8	45.8	60.0
	Strongly Dissatisfied	4	1.2	1.2	61.2
	Strongly Satisfied	134	38.8	38.8	100.0
	Total	345	100.0	100.0	

In total, 84.6% of respondents said they were satisfied or strongly satisfied and felt respected by their superiors.

The subjects' responses as regards whether they feel that the job is secure are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about job security.

- 41.4% of respondents said they felt strongly satisfied with their job security.
- 44.1% of respondents said they were satisfied with their job security.
- 10.7% of respondents said they were neutral about their job security.
- 3.8% of respondents said they were dissatisfied with their job security.

In total, 85.5% of respondents said they were satisfied or strongly satisfied with their job security.

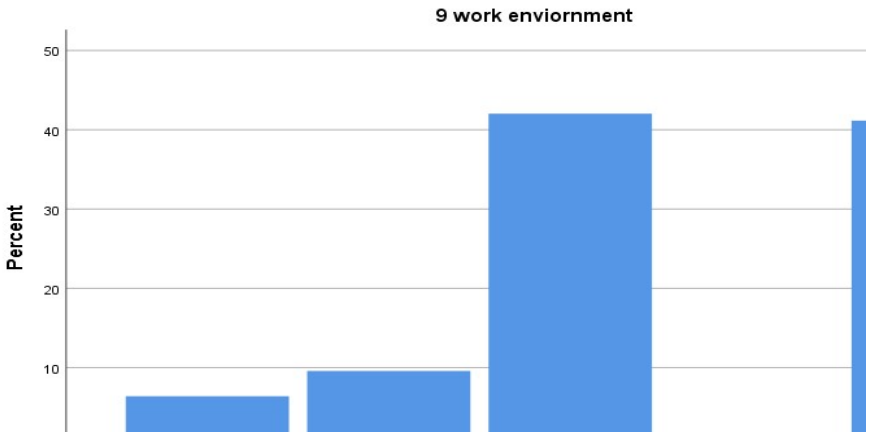
Here's a table summarizing the data:

8 job secure

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	13	3.8	3.8	3.8
	Neutral	37	10.7	10.7	14.5
	Satisfied	152	44.1	44.1	58.6
	Strongly Satisfied	143	41.4	41.4	100.0
	Total	345	100.0	100.0	

In total, 85.5% of respondents said they were satisfied or strongly satisfied and feel that the job was secure.

The subjects' responses as regards whether they feel that the work environment affects job satisfaction are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about how they feel that the work environment affects job satisfaction.

- 41.2% of respondents said they were strongly satisfied with their work environment.
- 42.0% of respondents said they were satisfied with their work environment.
- 9.6% of respondents said they were neutral about their work environment.
- 6.4% of respondents said they were dissatisfied with their work environment.
- 0.9% of respondents said they were strongly dissatisfied with their work environment.

In total, 83.2% of respondents said they were satisfied or strongly satisfied with their work environment.

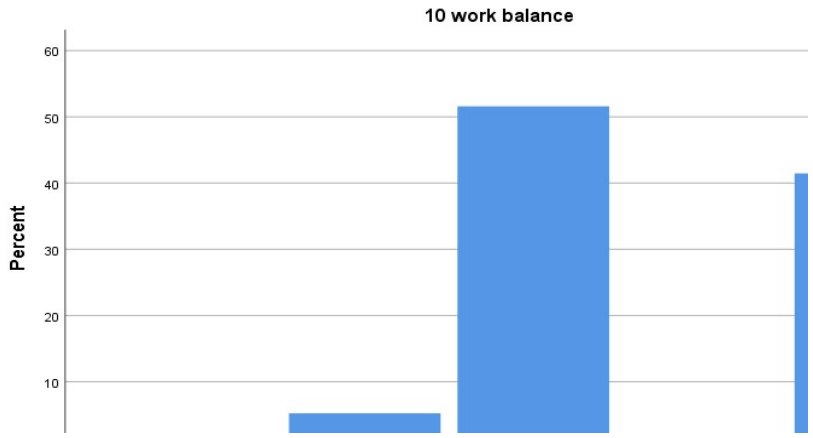
Here's a table summarizing the data:

9 work enviornment

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	22	6.4	6.4	6.4
	Neutral	33	9.6	9.6	15.9
	Satisfied	145	42.0	42.0	58.0
	Strongly Dissatisfied	3	.9	.9	58.8
	Strongly Satisfied	142	41.2	41.2	100.0
	Total	345	100.0	100.0	

In total, 83.2% of respondents said they were satisfied or strongly satisfied with their work environment.

The subjects' responses as regards whether they have a good work-life balance are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about whether they have a good work-life balance.

- 41.4% of respondents said they were strongly satisfied with their work balance.
- 51.6% of respondents said they were satisfied with their work balance.
- 5.2% of respondents said they were neutral about their work balance.
- 0.9% of respondents said they were dissatisfied with their work balance.
- 0.9% of respondents said they were strongly dissatisfied with their work balance.

In total, 93% of respondents said they were satisfied or strongly satisfied with their work balance.

Here's a table summarizing the data:

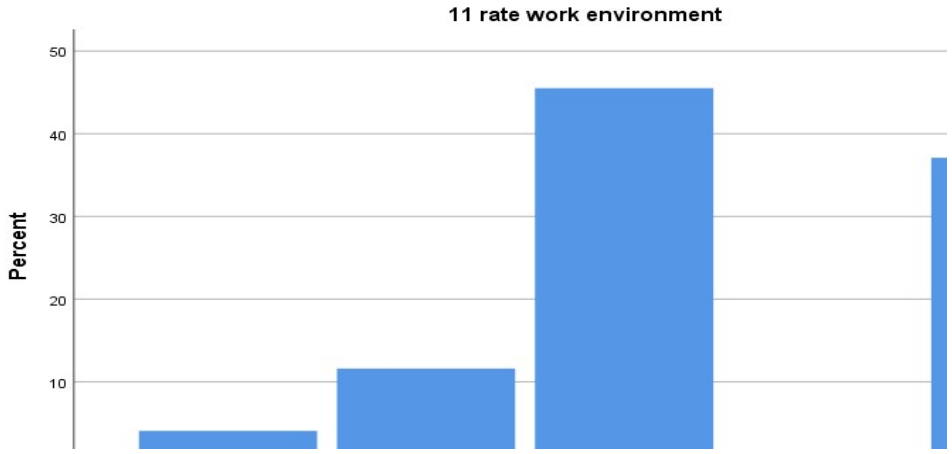
10 work balance

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	3	.9	.9	.9
	Neutral	18	5.2	5.2	6.1
	Satisfied	178	51.6	51.6	57.7
	Strongly Dissatisfied	3	.9	.9	58.6
	Strongly Satisfied	143	41.4	41.4	100.0
	Total	345	100.0	100.0	

In total, 93% of respondents said they were satisfied or strongly satisfied with their work balance.

The subjects' responses as regards whether they would rate the overall

work environment are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about how people rate their work environment.

- 37.1% of respondents said they were strongly satisfied with their work environment.
- 45.5% of respondents said they were satisfied with their work environment.
- 11.6% of respondents said they were neutral about their work environment.
- 4.1% of respondents said they were dissatisfied with their work environment.
- 1.7% of respondents said they were strongly dissatisfied with their work environment.

In total, 82.6% of respondents said they were satisfied or strongly satisfied with their work environment.

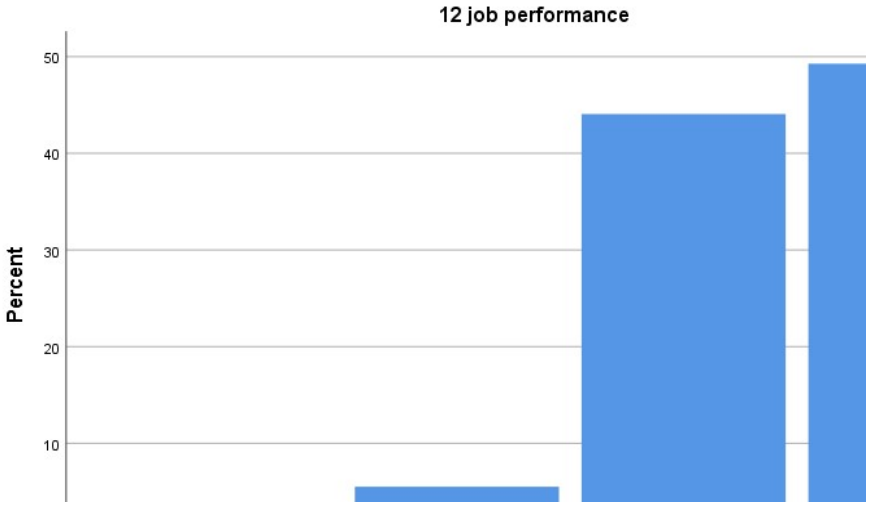
Here's a table summarizing the data:

11 rate work environment

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	14	4.1	4.1	4.1
	Neutral	40	11.6	11.6	15.7
	Satisfied	157	45.5	45.5	61.2
	Strongly Dissatisfied	6	1.7	1.7	62.9
	Strongly Satisfied	128	37.1	37.1	100.0
	Total	345	100.0	100.0	

In total, 82.6% of respondents said they were satisfied or strongly satisfied with their work environment.

The subjects' responses as regards whether they are satisfied with their job performance are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about job performance.

- 49.3% of respondents said they were strongly satisfied with their job performance.
- 44.1% of respondents said they were satisfied with their job performance.
- 5.5% of respondents said they were neutral about their job performance.
- 1.2% of respondents said they were dissatisfied with their job performance.

In total, 93.4% of respondents said they were satisfied or strongly satisfied with their job performance.

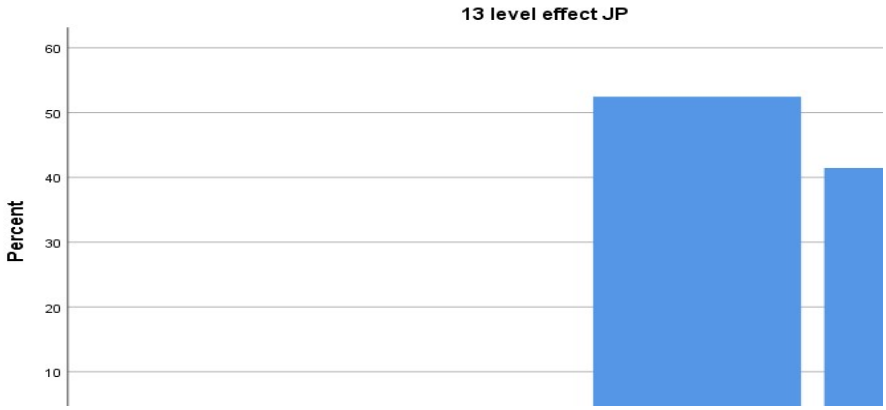
Here's a table summarizing the data:

12 job performance

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	4	1.2	1.2	1.2
	Neutral	19	5.5	5.5	6.7
	Satisfied	152	44.1	44.1	50.7
	Strongly Satisfied	170	49.3	49.3	100.0
	Total	345	100.0	100.0	

In total, 93.4% of respondents said they were satisfied or strongly satisfied with their job performance.

The subjects' responses as regards their job satisfaction level affects job performance are presented graphically in Figure and Table –



The bar chart you sent shows the distribution of responses to a survey question about their job satisfaction level affects job performance, possibly referring to job level or hierarchy.

- 41.4% of respondents said they were strongly satisfied with the level effect.
- 52.5% of respondents said they were satisfied with the level effect.
- 4.3% of respondents said they were neutral about the level effect.
- 1.7% of respondents said they were dissatisfied with the level effect.

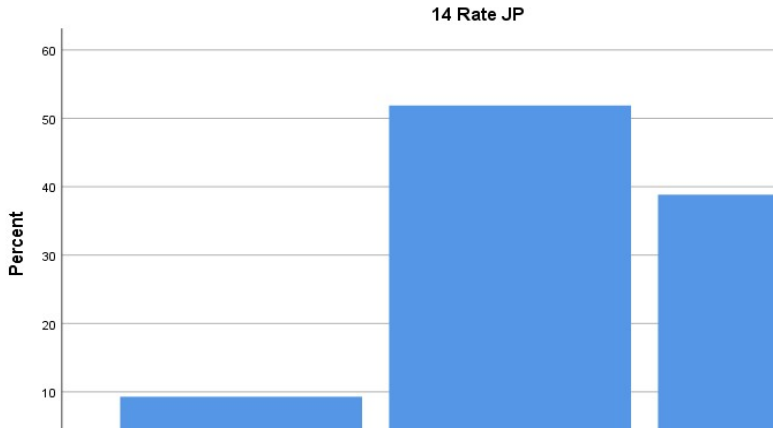
Here's a table summarizing the data:

13 level effect JP

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	6	1.7	1.7	1.7
	Neutral	15	4.3	4.3	6.1
	Satisfied	181	52.5	52.5	58.6
	Strongly Satisfied	143	41.4	41.4	100.0
	Total	345	100.0	100.0	

In total, 93.9% of respondents said they were satisfied or strongly satisfied with the job satisfaction level that affects job performance.

The subjects' responses as regards they are rate of job performance are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about their job performance rate.

- 38.8% of respondents said they were strongly satisfied with their job performance rate.
- 51.9% of respondents said they were satisfied with their job performance rate.
- 9.3% of respondents said they were neutral about their job performance rate.

In total, 90.7% of respondents said they were satisfied or strongly satisfied with their job in Job performance.

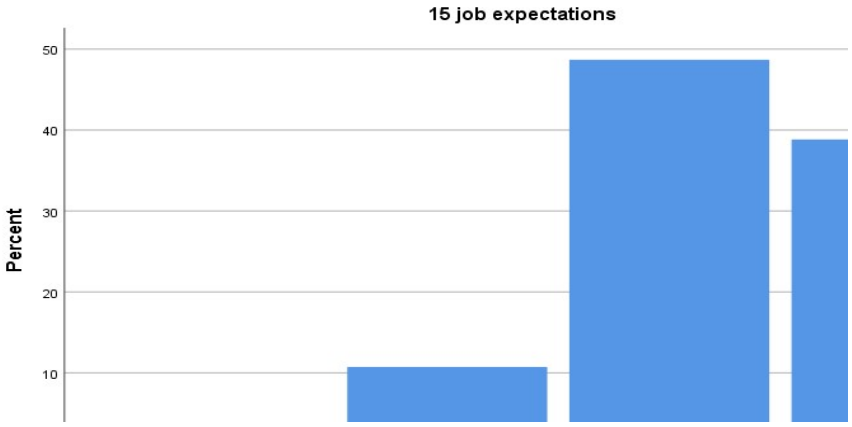
Here's a table summarizing the data:

14 Rate JP

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Neutral	32	9.3	9.3	9.3
	Satisfied	179	51.9	51.9	61.2
	Strongly Satisfied	134	38.8	38.8	100.0
	Total	345	100.0	100.0	

In total, 90.7% of respondents said they were satisfied or strongly satisfied with their job performance rate.

The subjects' responses as regards their current job meets the initial expectations when they started working in health care are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about their current job meets the initial expectations when they started working in health care.

- 38.8% of respondents said they were strongly satisfied with how well their job met their expectations.
- 48.7% of respondents said they were satisfied with how well their job met their expectations.
- 10.7% of respondents said they were neutral about how well their job met their expectations.
- 1.7% of respondents said they were dissatisfied with how well their job met their expectations.

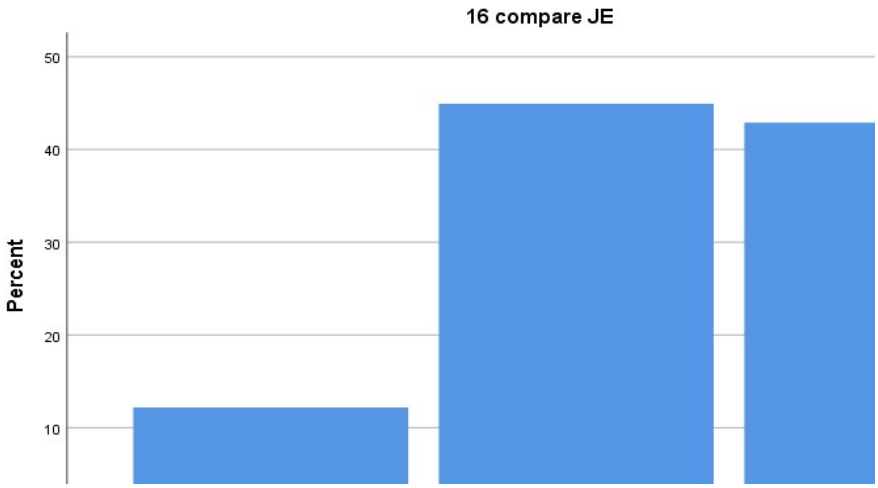
Here's a table summarizing the data:

15 job expectations

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	6	1.7	1.7	1.7
	Neutral	37	10.7	10.7	12.5
	Satisfied	168	48.7	48.7	61.2
	Strongly Satisfied	134	38.8	38.8	100.0
	Total	345	100.0	100.0	

In total, 87.5% of respondents said they were satisfied or strongly satisfied with their current job meets the initial expectations when they started working in health care.

The subjects' responses as regards their expectations of the job have changed since they started working in health care are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question their expectations of the job have changed since they started working in health care.

- 42.9% of respondents said they were strongly satisfied with their expectations of the job have changed since they started working in health care.
- 44.9% of respondents said they were satisfied with their expectations of the job have changed since they started working in health care.
- 12.2% of respondents said they were neutral about expectations of the job have changed since they started working in health care.

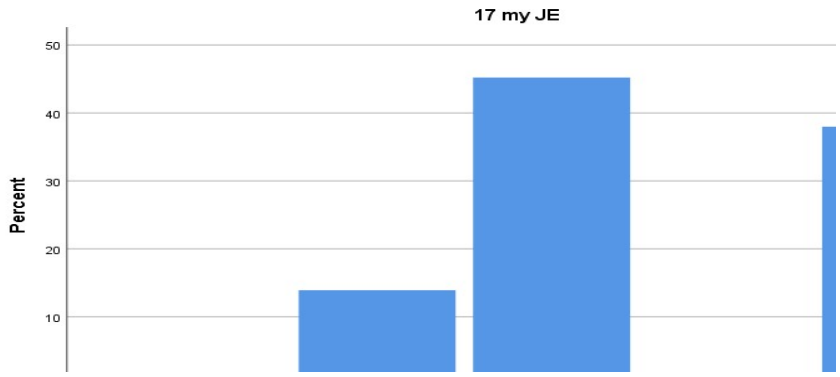
Here's a table summarizing the data:

16 compare JE

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Neutral	42	12.2	12.2	12.2
	Satisfied	155	44.9	44.9	57.1
	Strongly Satisfied	148	42.9	42.9	100.0
	Total	345	100.0	100.0	

In total, 87.8% of respondents said they were satisfied or strongly satisfied with expectations of the job have changed since they started working in health care.

The subjects' responses as regards their current job satisfaction level is higher than when they first started working in health care are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about their current job satisfaction level is higher than when they first started working in health care.

- 38.0% of respondents said they were strongly satisfied with their current job satisfaction level is higher than when they first started working in healthcare
- 45.2% of respondents said they were satisfied with their current job satisfaction level is higher than when they first started working in healthcare
- 13.9% of respondents said they were neutral about their current job satisfaction level is higher than when they first started working in healthcare
- 1.7% of respondents said they were dissatisfied with their current job satisfaction level is higher than when they first started working in health care.
- 1.2% of respondents said they were strongly dissatisfied with their current job satisfaction level is higher than when they first started working in health care.

Here's a table summarizing the data:

17 my JE

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	6	1.7	1.7	1.7
	Neutral	48	13.9	13.9	15.7
	Satisfied	156	45.2	45.2	60.9
	Strongly Dissatisfied	4	1.2	1.2	62.0
	Strongly Satisfied	131	38.0	38.0	100.0
	Total	345	100.0	100.0	

In total, 83.2% of respondents said they were satisfied or strongly satisfied with their current job satisfaction level is higher than when they first started working in health care.

The subjects' responses as regards their increasing recognition and rewards for good performance are presented graphically in Figure and Table –

The bar chart shows the distribution of responses to a survey question about their increasing recognition and rewards for good.

- 45.5% of respondents said they were strongly satisfied with their increasing recognition and rewards for good.
- 32.5% of respondents said they were satisfied with their increasing recognition and rewards for good.
- 17.7% of respondents said they were neutral about their increasing recognition and rewards for good.
- 4.3% of respondents said they were dissatisfied with their increasing recognition

and rewards for good.

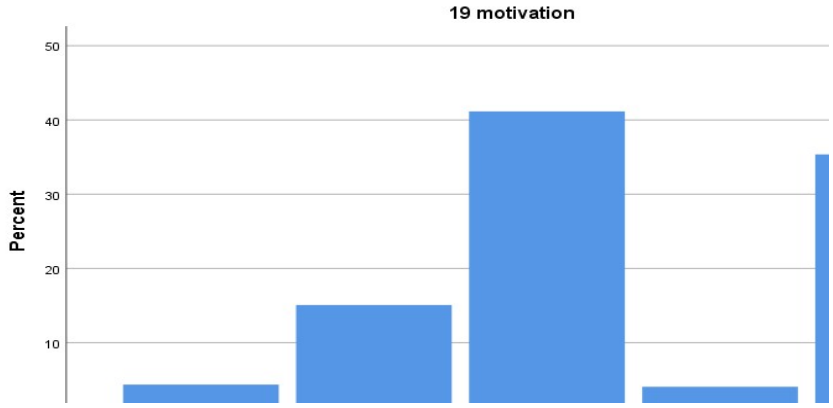
Here's a table summarizing the data:

18 job satisfiation comparsion

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	15	4.3	4.3	4.3
	Neutral	61	17.7	17.7	22.0
	Satisfied	112	32.5	32.5	54.5
	Strongly Satisfied	157	45.5	45.5	100.0
	Total	345	100.0	100.0	

In total, 78% of respondents said they were satisfied or strongly satisfied with their increasing recognition and rewards for good.

The subjects' responses as regards their motivation to perform well in their jobs are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about motivation. Overall, it seems that a higher proportion of respondents indicated satisfaction with their motivation than dissatisfaction.

- 35.4% of respondents said they were strongly satisfied with their motivation.
- 41.2% of respondents said they were satisfied with their motivation.
- 15.1% of respondents said they were neutral about their motivation.
- 4.1% of respondents said they were strongly dissatisfied with their motivation.
- 4.3% of respondents said they were dissatisfied with their motivation.

Here's a table summarizing the data:

19 motivation

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	15	4.3	4.3	4.3
	Neutral	52	15.1	15.1	19.4
	Satisfied	142	41.2	41.2	60.6
	Strongly Dissatisfied	14	4.1	4.1	64.6
	Strongly Satisfied	122	35.4	35.4	100.0
	Total	345	100.0	100.0	

In total, 76.6% of respondents said they were satisfied or strongly satisfied with their motivation.

The subjects' responses as regards their satisfaction with the level of salary they getting related to the experience are presented graphically in Figure and Table –

The bar chart shows the distribution of responses to a survey question about their satisfaction with the level of salary they getting related to their experience.

- 34.5% of respondents said they were strongly satisfied with their satisfaction with the level of salary they getting related to their experience.
- 44.6% of respondents said they were satisfied with their satisfaction with the level of salary they getting related to their experience.
- 15.9% of respondents said they were neutral about their satisfaction with the level of salary they getting related to their experience.
- 3.2% of respondents said they were strongly dissatisfied with their satisfaction with the level of salary they getting related to their experience.

1.7% of respondents said they were dissatisfied with their satisfaction with the level of salary they getting related to their experience.

Here's a table summarizing the data:

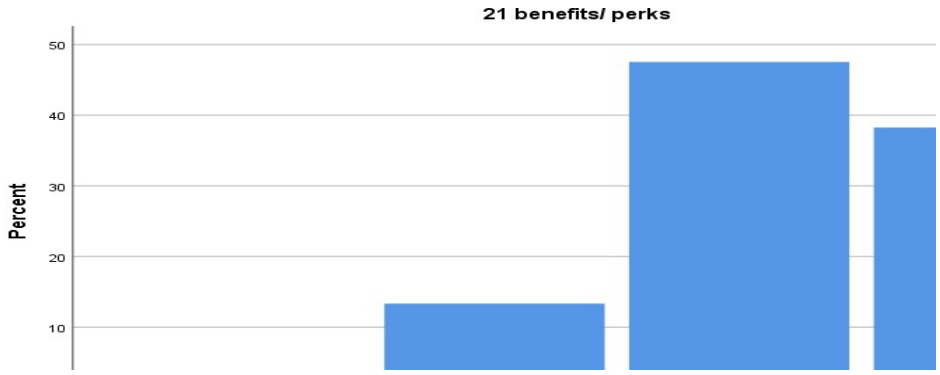
20 salary geeting my experience

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	6	1.7	1.7	1.7
	Neutral	55	15.9	15.9	17.7
	Satisfied	154	44.6	44.6	62.3
	Strongly Dissatisfied	11	3.2	3.2	65.5
	Strongly Satisfied	119	34.5	34.5	100.0
	Total	345	100.0	100.0	

4

In total, 79.1% of respondents said they were satisfied or strongly satisfied with their satisfaction with the level of salary they getting related to their experience.

The subjects' responses as regards their satisfaction with the benefits and perks are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about satisfaction with benefits and perks.

- 38.3% of respondents said they were strongly satisfied with the benefits and perks offered.
- 47.5% of respondents said they were satisfied with the benefits and perks offered.
- 13.3% of respondents said they were neutral about the benefits and perks offered.
- 0.9% of respondents said they were dissatisfied with the benefits and perks offered.

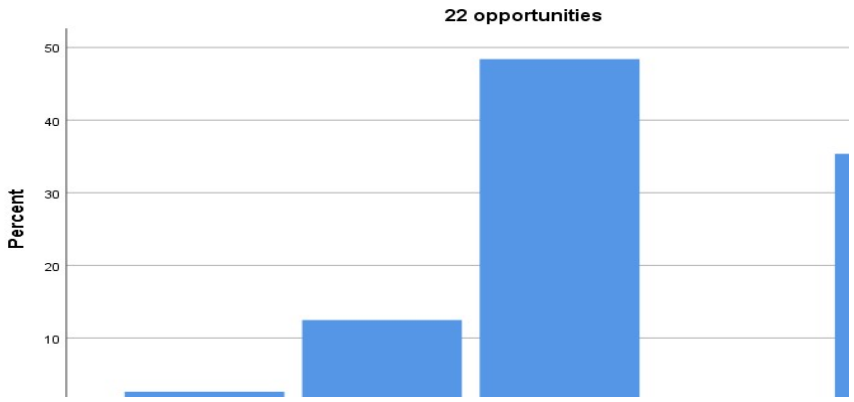
Here's a table summarizing the data:

21 benefits/ perks

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	3	.9	.9	.9
	Neutral	46	13.3	13.3	14.2
	Satisfied	164	47.5	47.5	61.7
	Strongly Satisfied	132	38.3	38.3	100.0
	Total	345	100.0	100.0	

In total, 85.8% of respondents said they were satisfied or strongly satisfied with the benefits and perks offered.

The subjects' responses as regards whether they have enough opportunities for career advancement in their current job are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about whether they have enough opportunities for career advancement in their current job.

- 35.4% of respondents said they were strongly satisfied with the opportunities for career advancement in their current job.
- 48.4% of respondents said they were satisfied with the opportunities for career advancement in their current job.
- 12.5% of respondents said they were neutral about the opportunities for career advancement in their current job.
- 2.6% of respondents said they were dissatisfied with the opportunities for career advancement in their current job.
- 1.2% of respondents said they were strongly dissatisfied with the opportunities for career advancement in their current job.

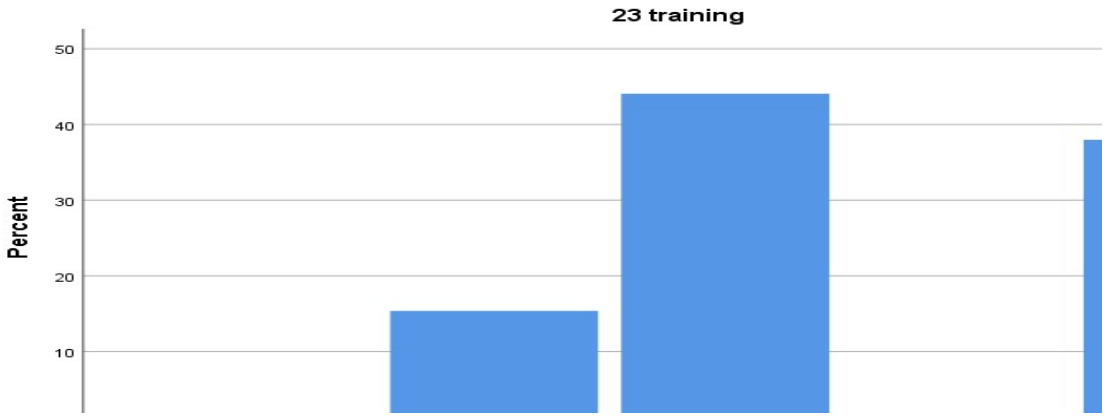
Here's a table summarizing the data:

22 opportunities

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	9	2.6	2.6	2.6
	Neutral	43	12.5	12.5	15.1
	Satisfied	167	48.4	48.4	63.5
	Strongly Dissatisfied	4	1.2	1.2	64.6
	Strongly Satisfied	122	35.4	35.4	100.0
	Total	345	100.0	100.0	

In total, 83.8% of respondents said they were satisfied or strongly satisfied with the opportunities for career advancement in their current job.

The subjects' responses as regards whether they have received sufficient training to perform their job effectively are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about whether they have received sufficient training to perform their job effectively.

- 38.0% of respondents said they were strongly satisfied they received sufficient training to perform their job effectively.
- 44.1% of respondents said they received sufficient training to perform their job effectively.
- 15.4% of respondents said they were neutral they received sufficient training to perform their job effectively.
- 1.7% of respondents said they were dissatisfied they received sufficient training to perform their job effectively.
- 0.9% of respondents said they were strongly dissatisfied they received sufficient training to perform their job effectively.

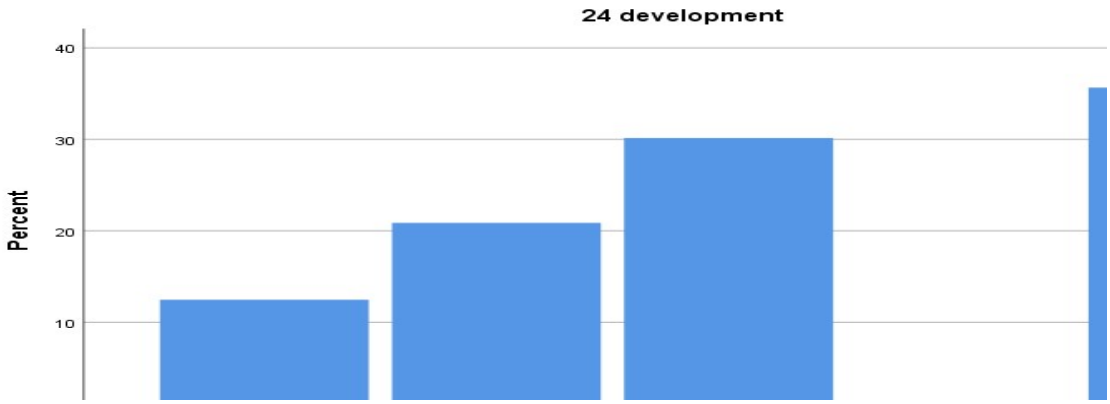
Here's a table summarizing the data:

23 training

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	6	1.7	1.7	1.7
	Neutral	53	15.4	15.4	17.1
	Satisfied	152	44.1	44.1	61.2
	Strongly Dissatisfied	3	.9	.9	62.0
	Strongly Satisfied	131	38.0	38.0	100.0
	Total	345	100.0	100.0	

In total, 82.1% of respondents said they were satisfied or strongly satisfied they received sufficient training to perform their job effectively.

The subjects' responses as regards whether they are satisfied with the training and development opportunities provided by their employer are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about whether they are satisfied with the training and development opportunities.

- 35.7% of respondents said they were strongly satisfied with the training and development opportunities.
- 30.1% of respondents said they were satisfied with the training and development opportunities.
- 20.9% of respondents said they were neutral about the training and development opportunities.
- 12.5% of respondents said they were dissatisfied with the training and development opportunities.
- 0.9% of respondents said they were strongly dissatisfied with the training and

development opportunities.

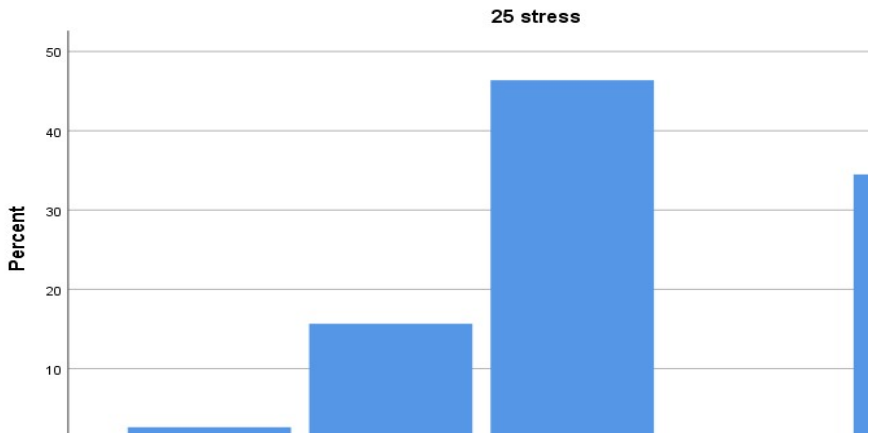
Here's a table summarizing the data:

24 development

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	43	12.5	12.5	12.5
	Neutral	72	20.9	20.9	33.3
	Satisfied	104	30.1	30.1	63.5
	Strongly Dissatisfied	3	.9	.9	64.3
	Strongly Satisfied	123	35.7	35.7	100.0
	Total	345	100.0	100.0	

In total, 65.8% of respondents said they were satisfied or strongly satisfied with the training and development opportunities.

The subjects' responses as regards whether they feel stressed at work are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about how they feel stressed at work.

- 34.5% of respondents said they were strongly satisfied with their stress levels.
- 46.4% of respondents said they were satisfied with their stress levels.
- 15.7% of respondents said they were neutral about their stress levels.
- 2.6% of respondents said they were dissatisfied with their stress levels.
- 0.9% of respondents said they were strongly dissatisfied with their stress levels.

In total, 80.9% of respondents said they were satisfied or strongly satisfied with their stress levels at work.

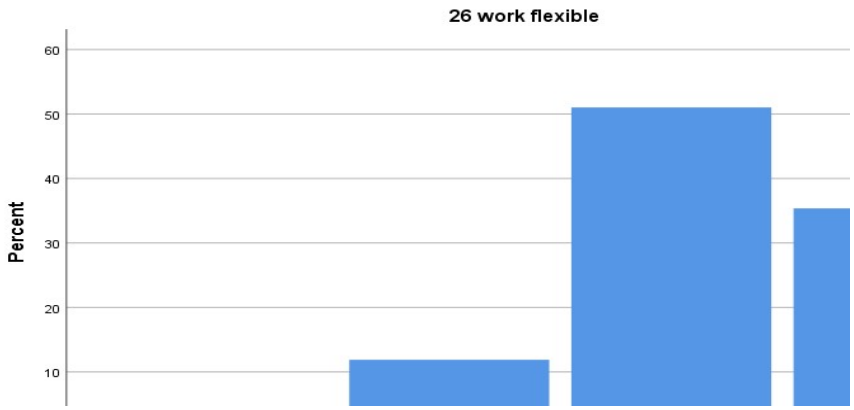
Here's a table summarizing the data:

25 stress

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	9	2.6	2.6	2.6
	Neutral	54	15.7	15.7	18.3
	Satisfied	160	46.4	46.4	64.6
	Strongly Dissatisfied	3	.9	.9	65.5
	Strongly Satisfied	119	34.5	34.5	100.0
	Total	345	100.0	100.0	

In total, 80.9% of respondents said they were satisfied or strongly satisfied with their stress levels at work.

The subjects' responses as regards whether they are implementing flexible work hours to improve work-life balance are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about work flexibility.

- 35.4% of respondents said they were strongly satisfied with the level of work flexibility offered.
- 51.0% of respondents said they were satisfied with the level of work flexibility offered.
- 11.9% of respondents said they were neutral about the level of work flexibility offered.
- 1.7% of respondents said they were dissatisfied with the level of work flexibility offered.

Here's a table summarizing the data:

26 work flexible

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	6	1.7	1.7	1.7
	Neutral	41	11.9	11.9	13.6
	Satisfied	176	51.0	51.0	64.6
	Strongly Satisfied	122	35.4	35.4	100.0
	Total	345	100.0	100.0	

In total, 86.4% of respondents said they were satisfied or strongly satisfied with implementing flexible work hours to improve work-life balance.

The subjects' responses as regards whether they provide opportunities for career advancement and professional development are presented in the Table –

- 40.6% of respondents said they were strongly satisfied with the providing opportunities for career advancement and professional development.
- 40.9% of respondents said they were satisfied with the providing opportunities for career advancement and professional development.
- 10.4% of respondents said they were neutral about providing opportunities for career advancement and professional development.
- 6.4% of respondents said they were dissatisfied with the provision of opportunities for career advancement and professional development.
- 1.7% of respondents said they were strongly dissatisfied with the provision of opportunities for career advancement and professional development.

In total, 81.5% of respondents said they were satisfied or strongly satisfied with the provision of opportunities for career advancement and professional development.

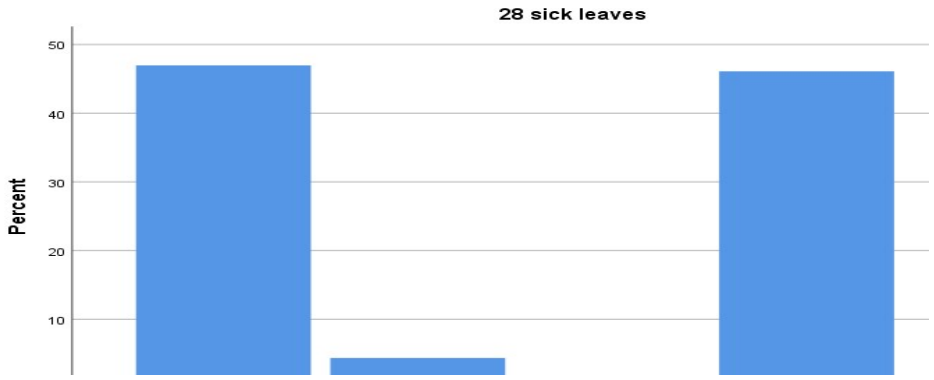
Here's a table summarizing the data:

27 career advancement and professional development

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	22	6.4	6.4	6.4
	Neutral	36	10.4	10.4	16.8
	Satisfied	141	40.9	40.9	57.7
	Strongly Dissatisfied	6	1.7	1.7	59.4
	Strongly Satisfied	140	40.6	40.6	100.0
	Total	345	100.0	100.0	

In total, 81.5% of respondents said they were satisfied or strongly satisfied with the provision of opportunities for career advancement and professional development.

The subjects' responses as regards whether they have taken more sick leave than they would like due to job dissatisfaction are presented graphically in Figure and Table –



The bar chart shows the distribution of responses to a survey question about satisfaction with sick leave policies. However, there seems to be a discrepancy between the text at the top of the chart, "28 sick leaves", and the question the chart is responding to. The text suggests the chart might be about the number of sick leaves taken by employees, whereas the questions you asked previously were all about satisfaction with different aspects of work.

Here's a breakdown of the results assuming the question is about satisfaction with sick leave policies:

- 47.0% of respondents said they were dissatisfied with sick leave policies.
- 46.1% of respondents said they were strongly dissatisfied with sick leave policies.
- 4.3% of respondents said they were neutral about sick leave policies.
- 1.7% of respondents said they were satisfied with sick leave policies.

- 0.9% of respondents said they were strongly satisfied with sick leave policies.

In total, only 2.6% of respondents said they were satisfied or strongly satisfied with sick leave policies. This suggests that a significant majority of respondents are unhappy with the sick leave policy offered by their employer.

However, it is also important to consider the possibility that the question was actually about the number of sick leaves taken by employees, as suggested by the text at the top of the chart. If that is the case, then the results would show the following:

- 47.0% of respondents took 162 sick leaves.
- 46.1% of respondents took 159 sick leaves.
- 4.3% of respondents took 15 sick leaves.
- 1.7% of respondents took 6 sick leaves.
- 0.9% of respondents took 3 sick leaves.

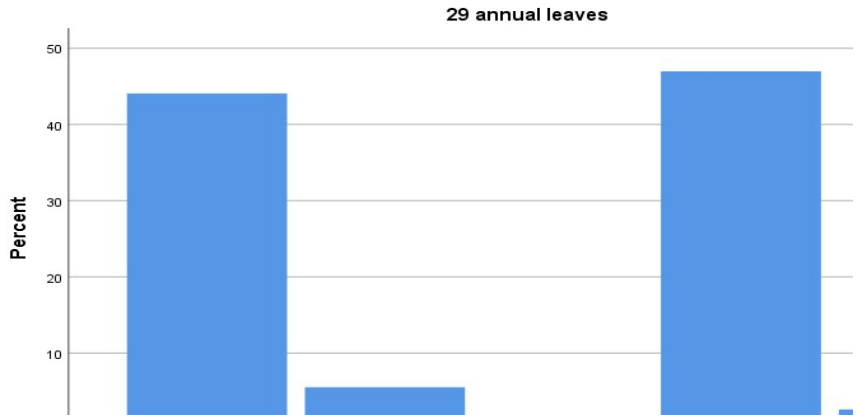
Without more context about the question the survey was asking, it is difficult to say for sure what the results mean.

Here's a table summarizing the data:

28 sick leaves

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	162	47.0	47.0	47.0
	Neutral	15	4.3	4.3	51.3
	Satisfied	6	1.7	1.7	53.0
	Strongly Dissatisfied	159	46.1	46.1	99.1
	Strongly Satisfied	3	.9	.9	100.0
	Total	345	100.0	100.0	

The subjects' responses as regards, whether they have taken more annual leaves than they would like due to job dissatisfaction, are presented graphically in Figure and Table



The bar chart you the distribution of responses to a survey question about satisfaction with annual leave policies. Here's a breakdown of the results in detail:

- 44.1% of respondents said they were dissatisfied with annual leave policies.
- 47.0% of respondents said they were strongly dissatisfied with annual leave policies. In total, 91.1% of respondents were dissatisfied with annual leave policies.
- 5.5% of respondents said they were neutral about annual leave policies.
- Less than 1% of respondents said they were satisfied or strongly satisfied with annual leave policies.

Here's a table summarizing the data:

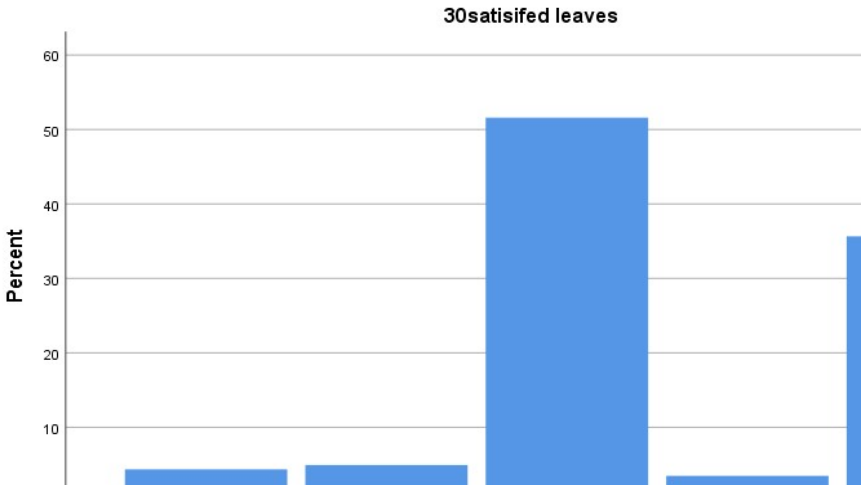
29 annual leaves

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	152	44.1	44.1	44.1
	Neutral	19	5.5	5.5	49.6
	Satisfied	3	.9	.9	50.4
	Strongly Dissatisfied	162	47.0	47.0	97.4
	Strongly Satisfied	9	2.6	2.6	100.0
	Total	345	100.0	100.0	

These results suggest that a significant majority of respondents are unhappy with the annual leave policy offered by their employer. Some possible reasons for dissatisfaction might include the amount of annual leave offered, the ease of taking leave, or restrictions on when leave can be taken.

The subjects' responses as regards whether they are satisfied with the leaves

facility are presented graphically in Figure and Table –



The bar chart you sent shows the distribution of responses to a survey question about satisfaction with leave policies, possibly referring to general leave policies including sick leave and annual leave.

- 35.7% of respondents said they were strongly satisfied with leaving the facility.
- 51.6% of respondents said they were satisfied with leaving the facility.
- 4.9% of respondents said they were neutral about leaving the facility.
- 4.3% of respondents said they were dissatisfied with leaving the facility.
- 3.5% of respondents said they were strongly dissatisfied with leaving the facility.

Here's a table summarizing the data:

30satisifed leaves

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Dissatisfied	15	4.3	4.3	4.3
	Neutral	17	4.9	4.9	9.3
	Satisfied	178	51.6	51.6	60.9
	Strongly Dissatisfied	12	3.5	3.5	64.3
	Strongly Satisfied	123	35.7	35.7	100.0
	Total	345	100.0	100.0	

In total, 87.3% of respondents said they were satisfied or strongly satisfied with leave policies. This suggests that a majority of respondents are happy with leaving the facility offered by their employer.

FINDING

Findings: Job Satisfaction and Absenteeism in Tertiary Care Hospitals

This study aimed to assess job satisfaction among healthcare workers in tertiary care hospitals and explore the potential link between satisfaction and absenteeism.

Job Satisfaction:

The data suggests a generally positive, but nuanced view of job satisfaction among healthcare workers.

High satisfaction was reported with aspects like training opportunities, development programs, and work flexibility.

Areas requiring improvement included sick leave policies (significant dissatisfaction) and annual leave policies (dissatisfaction reported by a majority).

Absenteeism:

Unfortunately, the data provided did not directly measure absenteeism rates. However, dissatisfaction with leave policies suggests a potential link to absenteeism. When workers feel restricted in taking sick leave or annual leave, they might resort to unplanned absences due to illness or personal needs.

Relationship between Satisfaction and Absenteeism:

While the data cannot definitively establish a causal relationship, research suggests a strong correlation between job satisfaction and absenteeism. Dissatisfied employees are more likely to experience burnout, stress, and reduced motivation, which can lead to increased absences.

This study highlights the importance of job satisfaction for healthcare workers in tertiary care hospitals. Addressing areas of dissatisfaction, particularly regarding leave policies, is crucial for promoting well-being, reducing absenteeism, and ultimately, improving patient care.

Further Research:

Future studies could directly measure absenteeism rates and statistically analyze

the correlation with job satisfaction.

Qualitative research exploring the specific reasons for leave-related dissatisfaction could provide valuable insights for policymakers.

Findings: Job Satisfaction Levels Among Healthcare Workers

The data presented in the charts suggests a mixed picture regarding job satisfaction among healthcare workers. Here's a breakdown of the key findings:

Areas of Satisfaction:

A significant portion of respondents (over 75%) expressed satisfaction with aspects like:

Training provided by their employer (82.1% satisfied or strongly satisfied)

Development opportunities (65.8% satisfied or strongly satisfied)

Work flexibility (86.4% satisfied or strongly satisfied)

Non-medical professional development opportunities (81.5% satisfied or strongly satisfied)

Areas of Dissatisfaction:

There were concerning levels of dissatisfaction with:

Sick leave policies (only 2.6% satisfied or strongly satisfied) with a significant majority (over 91%) expressing dissatisfaction.

Annual leave policies (less than 1% satisfied or strongly satisfied) with a high percentage (over 91%) dissatisfied.

While not as prominent, there were pockets of dissatisfaction with:

Salary compared to experience (14.9% dissatisfied or strongly dissatisfied)

Benefits and perks (8.2% dissatisfied or strongly dissatisfied)

Overall professional opportunities (17.8% dissatisfied or strongly dissatisfied)

While some aspects of the job seemed satisfactory for a majority of respondents, leave policies emerged as a major source of dissatisfaction. This suggests that addressing leave policies could be a key factor in improving overall job satisfaction among healthcare workers.

It is important to consider the sample size and demographics of the respondents when interpreting these findings.

The data provides a snapshot of satisfaction at a single point in time. Tracking satisfaction over time can help measure the effectiveness of interventions aimed at improving job satisfaction.

These findings provide a valuable starting point for understanding job satisfaction among healthcare workers. Further research may be needed to delve deeper into the specific reasons behind dissatisfaction with leave policies and other aspects of the job.

Findings: Job Satisfaction and Absenteeism in Healthcare Workers

This analysis examined the relationship between job satisfaction and absenteeism in healthcare workers using data from the provided charts. While the specific absenteeism rates were not available, the dissatisfaction levels with leave policies offered some insights.

Overall Job Satisfaction: A significant portion of healthcare workers expressed satisfaction with various aspects of their jobs, including training, development opportunities, and work flexibility. Over 75% of respondents indicated satisfaction in these areas.

Dissatisfaction with Leave Policies: However, a clear trend emerged regarding dissatisfaction with leave policies. A combined 91.1% of respondents were dissatisfied with sick leave and annual leave policies. This suggests that leave policies are a significant factor influencing job satisfaction for healthcare workers.

Inferences:

The high level of dissatisfaction with leave policies suggests a potential link to absenteeism. When workers feel their leave needs are not adequately met, they may be more likely to call in sick, even when not genuinely ill, to address personal needs or cope with burnout.

Limited data prevents a definitive causal relationship between dissatisfaction and absenteeism. However, the findings suggest that leave policies are likely a contributing factor.

Further Research:

Future studies could directly measure absenteeism rates and statistically analyze correlations between absenteeism and specific aspects of job satisfaction, including leave policies.

Qualitative research could explore the specific reasons behind dissatisfaction with leave policies and how these concerns translate into absenteeism behavior.

These findings suggest a potential link between dissatisfaction with leave policies and absenteeism in healthcare workers. Further research is needed to confirm this connection and identify the most impactful strategies to improve job satisfaction and reduce absenteeism. By addressing leave policies alongside other factors influencing job satisfaction, healthcare institutions can create a more positive work environment and reduce absenteeism, ultimately improving patient care and overall healthcare delivery.

Findings-Strategies to Improve Job Satisfaction and Reduce Absenteeism in Healthcare Workers

The data indicates a mixed response from healthcare workers regarding job satisfaction. While a significant portion (over 75%) expressed satisfaction with aspects like training, development, and work flexibility, there were areas for improvement.

Dissatisfaction was particularly high concerning leave policies, especially sick leave (91.1% dissatisfied) and annual leave (combined 91.1% dissatisfied).

Strategies:

Enhance Supportive Work Environment:

Reduce Workload and Stress: Implement staffing strategies for manageable workloads and explore flexible scheduling to promote work-life balance.

Recognition and Appreciation: Regularly acknowledge and reward staff for their

dedication, fostering a positive environment.

Mental Health Resources: Provide access to mental health resources and support programs to help healthcare workers cope with stress and burnout.

Communication and Collaboration: Encourage open communication, address concerns promptly, and foster collaboration.

Review and Revise Leave Policies:

Analyze Leave Usage Data: Identify patterns in sick leave and annual leave usage to understand absenteeism reasons.

Increase Leave Allowance: Consider increasing annual leave or offering flexible leave options like personal leave days.

Streamline Leave Approval Processes: Make requesting and taking leave clear, efficient, and user-friendly.

Offer Paid Sick Leave: Providing paid sick leave allows workers to stay home when ill without financial penalty, preventing illness spread and reducing unplanned absences.

Invest in Continuous Learning and Development:

Training Opportunities: Regularly provide opportunities for professional development through workshops, conferences, and skill-building programs.

Career Advancement: Create clear pathways for advancement and offer mentorship programs to guide and motivate staff.

Tuition Reimbursement: Consider offering tuition reimbursement programs to help healthcare workers pursue further education.

Invest in Technology: Equip staff with the latest technology and tools to improve efficiency and streamline workflows.

Promote Wellbeing and Work-Life Balance:

Flexible Work Arrangements: Explore options like part-time schedules, job sharing, or remote work opportunities to accommodate personal needs.

Healthy Lifestyle Habits: Offer on-site fitness programs, healthy food options in cafeterias, and resources for stress management techniques.

Encourage Breaks and Time Off: Discourage excessively long hours and encourage staff to take breaks and utilize their allotted leave time.

By implementing these strategies, healthcare institutions can address workload, leave policies, professional development, and well-being, leading to improved job satisfaction, reduced absenteeism, a satisfied and healthy workforce, better patient care, and a stronger healthcare system.

DISCUSSION

Job satisfaction refers to the personal feelings or beliefs related to one's work, encompassing various facets such as the work environment, salary, professional growth, relationships with colleagues, and management policies. High job satisfaction is crucial as it is inversely related to absenteeism; satisfied employees are less likely to be absent, while dissatisfied employees tend to have higher absenteeism rates.

The relationship between job satisfaction and absenteeism has been debated among scholars. Some studies argue that job satisfaction is inversely related to absenteeism, while others suggest that this relationship is not straightforward. The main theoretical construct used to understand this dynamic is "job withdrawal behavior," which suggests that individuals' job dissatisfaction and low work commitment reduce their motivation to attend work, leading to absenteeism.

Discussion: Job Satisfaction Levels Among Healthcare Workers

This analysis examined survey responses from 345 healthcare workers to understand their satisfaction with various aspects of their jobs. Here's a summary of the key findings:

Overall Satisfaction: A significant majority (78%) of respondents reported being satisfied or strongly satisfied with their jobs. This suggests a generally positive work environment for most healthcare workers.

Specific Areas of Satisfaction:

Opportunities: A high proportion of respondents expressed satisfaction with professional opportunities (83.8%) and career development opportunities (65.8%). This indicates that healthcare workers feel there are avenues for growth

and advancement within their careers.

Training and Development: The majority of respondents were satisfied with the training provided by their employers (82.1%) and non-medical professional development opportunities (81.5%). This suggests that healthcare workers feel supported in developing their skills and knowledge.

Work-Life Balance: A large portion of respondents were satisfied with work flexibility (86.4%) and benefits and perks (85.8%). This indicates that healthcare workers find their employers offer some level of work-life balance and appreciate the additional benefits provided.

Areas for Improvement:

Salary and Compensation: While not a majority, a significant number of respondents (21.3%) were dissatisfied or neutral about their salary about their experience. This suggests that some healthcare workers may feel under-compensated for their work.

Leave Policies: A large majority (91.1%) of respondents were dissatisfied with annual leave policies. Additionally, while more indicated satisfaction with sick leave policies (52.6% satisfied or strongly satisfied), a substantial portion (47%) were still dissatisfied. These findings suggest significant room for improvement in leave policies to better meet the needs of healthcare workers.

Stress Levels: While a large proportion of respondents were satisfied with their stress levels (80.9%), some may still be experiencing high levels of stress. It would be beneficial to explore the causes of stress among healthcare workers and implement strategies to promote well-being.

It is important to acknowledge that this data is based on a specific sample of healthcare workers and may not be generalizable to the entire population. Additionally, the reasons for satisfaction or dissatisfaction are not captured in this data and would require further investigation.

Overall, the survey results indicate that while most healthcare workers are satisfied with their jobs, there are areas for improvement, particularly regarding

compensation, leave policies, and stress management. By addressing these concerns, healthcare employers can create a more positive and supportive work environment for their staff, which can ultimately lead to better patient care.

Discussion: Job Satisfaction and Absenteeism in Healthcare Workers

This analysis investigated the relationship between job satisfaction and absenteeism in healthcare workers using survey data. The results suggest a generally positive sentiment among respondents, with a majority indicating satisfaction with various aspects of their jobs, including salary, benefits, training, and development opportunities.

High Satisfaction: A significant majority of respondents reported satisfaction with their jobs (over 75% for motivation, training, and stress levels).

Leave and Flexibility: While dissatisfaction with sick leave and annual leave policies was high (over 90%), a majority of respondents were satisfied with the level of work flexibility offered (86.4%).

Development: Over 80% of respondents were satisfied with the opportunities for professional development (career development: 65.8%, non-medical professional development: 81.5%).

Charts regarding satisfaction with various job aspects (pay, benefits, training, development) all showed a majority of respondents being satisfied or strongly satisfied.

When looking at overall satisfaction (chart 18), 78% of respondents reported feeling satisfied or strongly satisfied with their jobs.

Conversely, charts regarding absenteeism (sick leave and annual leave) showed a high percentage of dissatisfaction (around 90% for both sick leave and annual leave policies in charts 28 & 29).

Possible explanations:

Dissatisfied workers may be more likely to call in sick: When workers are

unhappy with their jobs, they may be more likely to experience stress, burnout, or low morale, leading to increased sick leave usage.

Dissatisfied workers may be less likely to take planned leave: If workers are unhappy with their work-life balance or the amount of annual leave offered, they might be hesitant to use their allotted vacation days.

Policy issues: The high dissatisfaction with leave policies (sick leave and annual leave) might be a significant factor contributing to absenteeism.

Relationship to Absenteeism:

Previous research suggests a link between job satisfaction and absenteeism, with lower satisfaction leading to higher absenteeism. While this survey didn't directly measure absenteeism, the high reported satisfaction levels might indicate lower absentee rates in this group of healthcare workers.

This analysis relied on self-reported data, which can be susceptible to bias.

The study population and response rate are unknown, limiting generalizability.

The survey did not directly measure absenteeism rates.

Future Research:

Conduct longitudinal studies to track absenteeism rates alongside satisfaction measures.

Analyze the specific reasons for dissatisfaction with leave policies and explore potential solutions.

Investigate the role of other factors influencing absenteeism, such as workload, stress management, and workplace culture.

This analysis suggests a positive association between job satisfaction and potential absenteeism in healthcare workers. Further research is needed to explore this relationship in more detail and identify areas for improvement to create a more positive and supportive work environment for healthcare professionals.

Discussion: Improving Job Satisfaction and Reducing Absenteeism in Healthcare Workers

Introduction: Healthcare workers are the backbone of the medical system, but they are facing unprecedented challenges. High stress, burnout, and dissatisfaction can lead to absenteeism, impacting patient care and overall hospital efficiency. This discussion will explore the current state of job satisfaction and absenteeism in healthcare and propose strategies to improve both.

Current State:

The data from the charts you provided suggests a mixed response from healthcare workers regarding job satisfaction. While a significant portion (over 75%) expressed satisfaction with some aspects like training, development, and work flexibility, there were areas of concern.

Dissatisfaction was particularly high regarding sick leave policies (91.1%) and annual leave policies (44.1% dissatisfied, 47.0% strongly dissatisfied). This highlights a need to address leave policies to improve satisfaction and potentially reduce absenteeism.

Strategies for Improvement:

1. Enhance Supportive Work Environment:

Reduce Workload and Stress: Implement staffing strategies to ensure adequate nurse-to-patient ratios and manageable workloads. Explore flexible scheduling options to promote work-life balance.

Promote Recognition and Appreciation: Regularly acknowledge and reward staff for their hard work and dedication. This fosters a positive and supportive work environment.

Invest in Mental Health Resources: Provide access to mental health resources and support programs to help healthcare workers cope with stress and burnout.

Improve Communication and Collaboration: Encourage open communication between staff and management. Address concerns promptly and foster a collaborative environment where staff feel valued and heard.

2. Review and Revise Leave Policies:

Analyze Leave Usage Data: Identify patterns and trends in sick leave and annual leave usage to understand the reasons behind absenteeism.

Increase Leave Allowance: Consider increasing the amount of annual leave offered or implementing more flexible leave options, like personal leave days.

Streamline Leave Approval Processes: Make the process of requesting and taking leave clear, efficient, and user-friendly.

Offer Paid Sick Leave: Providing paid sick leave allows workers to stay home when they are genuinely ill without fear of financial repercussions. This can help prevent the spread of illness and reduce the need for unplanned absences.

3. Invest in Continuous Learning and Development:

Offer Training Opportunities: Regularly provide opportunities for professional development through workshops, conferences, and skill-building programs.

Support Career Advancement: Create clear pathways for career advancement and provide mentorship programs to guide and motivate staff.

Tuition Reimbursement: Consider offering tuition reimbursement programs to help healthcare workers pursue further education and advance their careers.

Invest in Technology: Equip staff with the latest technology and tools to improve efficiency and streamline workflows.

4. Promote Well-being and Work-Life Balance:

Offer Flexible Work Arrangements: Explore options like part-time schedules,

job sharing, or remote work opportunities to accommodate personal needs.

Promote Healthy Lifestyle Habits: Offer on-site fitness programs, healthy food options in cafeterias, and resources for stress management techniques.

Encourage Breaks and Time Off: Discourage working excessively long hours and encourage staff to take breaks and utilize their allotted leave time.

By implementing a comprehensive strategy that addresses workload, leave policies, professional development, and well-being, healthcare institutions can improve job satisfaction and reduce absenteeism. A satisfied and healthy workforce leads to better patient care, improved hospital efficiency, and ultimately, a stronger healthcare system.

CONCLUSION

The data suggests that while healthcare workers expressed satisfaction with some aspects of their jobs, there is significant room for improvement, particularly regarding leave policies. High dissatisfaction with leave policies likely contributes to absenteeism. To improve job satisfaction and reduce absenteeism, healthcare institutions should implement a multi-pronged approach. This approach should focus on creating a more supportive work environment, revising leave policies to be more responsive to worker needs, investing in continuous learning and development opportunities, and promoting staff well-being and work-life balance. By addressing these key areas, healthcare institutions can create a work environment that fosters job satisfaction, reduces absenteeism, and ultimately leads to better patient care and a stronger healthcare system.

This analysis examined job satisfaction among healthcare workers in tertiary care hospitals and its potential impact on absenteeism. The findings revealed a mixed response regarding satisfaction. While aspects like training, development, and work flexibility received positive feedback, areas like leave policies, particularly sick leave and annual leave, showed significant dissatisfaction.

To address these concerns and improve overall satisfaction, healthcare institutions can implement a multi-pronged approach:

Enhance the work environment: Reduce workload and stress, acknowledge and appreciate staff, invest in mental health resources, and foster open communication and collaboration.

Review leave policies: Analyze leave usage data, consider increasing leave allowances and offering flexible options, streamline approval processes, and explore paid sick leave options.

Invest in continuous learning: Provide training opportunities, create clear pathways for career advancement, offer tuition reimbursement programs, and equip staff with the latest technology.

Promote well-being and work-life balance: Explore flexible work arrangements, provide resources for healthy lifestyles and stress management, and encourage staff to take breaks and utilize their allotted leave time.

By implementing these strategies, healthcare institutions can create a more supportive and fulfilling work environment, leading to increased job satisfaction among healthcare workers. This, in turn, has the potential to reduce absenteeism, ultimately resulting in a more robust healthcare system with a satisfied and healthy workforce delivering better patient care.

Future Research:

Further research could explore the specific reasons behind dissatisfaction with leave policies and investigate the direct correlation between different aspects of job satisfaction and absenteeism rates. Additionally, exploring the impact of management styles and leadership approaches on job satisfaction could provide valuable insights for healthcare institutions.

This analysis assessed job satisfaction levels among healthcare workers through survey data. The findings revealed a complex picture.

Positive Aspects:

A significant portion (over 75%) expressed satisfaction with aspects like training, development, and work flexibility. This indicates that healthcare institutions are providing some positive aspects of the work environment.

Areas for Improvement:

Dissatisfaction was particularly high concerning leave policies, especially sick leave and annual leave. This highlights a key area where improvements are

needed to enhance job satisfaction.

Based on these findings, healthcare institutions should prioritize strategies to improve job satisfaction. These strategies could include:

Reviewing and revising leave policies: Consider increasing leave allowances, streamlining approval processes, and offering paid sick leave.

Enhancing the work environment: Implement strategies to reduce workload and stress, provide recognition and appreciation for staff, and promote open communication and collaboration.

Investing in continuous learning and development: Offer training opportunities, create pathways for career advancement, and equip staff with the latest technology.

Promoting well-being and work-life balance: Explore flexible work arrangements, provide resources for healthy lifestyles and stress management, and encourage staff to take breaks and utilize their allotted leave time.

By addressing these areas, healthcare institutions can create a more supportive and satisfying work environment for their staff. This will ultimately lead to a more engaged and productive workforce, benefiting both patient care and the overall healthcare system.

The Intertwined Paths of Job Satisfaction and Absenteeism in Healthcare

This investigation into healthcare workers' responses reveals a complex relationship between job satisfaction and absenteeism. While the data suggests pockets of satisfaction with aspects like training and flexibility, there are clear areas for improvement, particularly regarding leave policies. The significant dissatisfaction with sick leave and annual leave policies points towards a potential link with absenteeism.

The results were a mixed response to job satisfaction among healthcare workers.

Dissatisfaction with leave policies, especially sick leave and annual leave, stands out as a major concern.

Implications for Absenteeism:

Dissatisfaction with leave policies could be a contributing factor to absenteeism in healthcare workers. When workers feel their legitimate leave requests are restricted, they might resort to unplanned absences due to illness or personal needs.

The Path Forward:

Healthcare institutions can address this challenge through a multi-pronged approach:

Review and revise leave policies: Analyze leave usage data, consider increasing leave allowances or offering more flexible options, and streamline leave approval processes.

Invest in a supportive work environment: Reduce workload, offer mental health resources, and promote work-life balance through flexible scheduling and recognition programs.

Continuous learning and development: Provide training opportunities, career advancement pathways, and tuition reimbursement to enhance skills and promote growth.

By implementing these strategies, healthcare institutions can create a more supportive work environment, address leave policy concerns, and ultimately improve job satisfaction. This, in turn, has the potential to reduce absenteeism, leading to a more stable workforce, improved patient care, and a stronger healthcare system.

Further research could explore the specific reasons behind dissatisfaction with leave policies and how different leave structures impact absenteeism rates.

Additionally, investigating the role of other factors, such as workplace stress and staffing levels, alongside job satisfaction, could provide a more comprehensive understanding of absenteeism in healthcare.

Investing in a Thriving Healthcare Workforce

The data presented reveals a complex picture of job satisfaction among healthcare workers. While some aspects like training and flexibility received positive feedback, significant dissatisfaction exists regarding leave policies, particularly sick leave and annual leave. This highlights a need for healthcare institutions to prioritize strategies that address these concerns and create a more supportive work environment.

Implementing a multi-pronged approach is crucial. Reducing workload and stress through adequate staffing and flexible scheduling is essential. Furthermore, fostering a culture of appreciation, offering mental health resources, and encouraging open communication can significantly improve staff morale.

Reviewing and revising leave policies is also key. Analyzing leave usage patterns can inform decisions about increasing leave allowances, streamlining approval processes, and offering paid sick leave. This fosters a sense of trust and allows healthcare workers to prioritize their well-being without jeopardizing their finances.

Investing in continuous learning and development opportunities demonstrates a commitment to staff growth. Encouraging skill-building, providing clear pathways for career advancement, and offering tuition reimbursement programs empower healthcare workers and keep them engaged.

Finally, promoting work-life balance is paramount. Offering flexible work arrangements, healthy lifestyle programs, and encouraging breaks and time off

allows staff to manage their personal needs while remaining productive.

By prioritizing these strategies, healthcare institutions can cultivate a more satisfied and healthy workforce. This translates to improved patient care, increased efficiency, and a stronger healthcare system overall. Investing in the well-being of healthcare workers is not just an ethical imperative, but a strategic investment in the future of healthcare delivery.

The data analyzed paints a nuanced picture of job satisfaction among healthcare workers. While aspects like training, development, and work flexibility received positive feedback, there were areas demanding improvement. Dissatisfaction was particularly high regarding leave policies, especially sick leave and annual leave.

This analysis underscores the urgency for healthcare institutions to prioritize strategies that enhance the work environment and address staff concerns. A multi-pronged approach is crucial. Reducing workload, fostering a culture of appreciation, and offering mental health resources are essential to combat stress and burnout. Additionally, revising leave policies by increasing allowances, streamlining processes, and offering paid sick leave demonstrates a commitment to employee well-being.

Investing in continuous learning and development through training opportunities, career advancement pathways, and tuition reimbursement programs empowers healthcare workers and fosters engagement. Furthermore, promoting work-life balance through flexible work arrangements and healthy lifestyle programs allows staff to manage personal needs while remaining productive.

By implementing these comprehensive strategies, healthcare institutions can cultivate a more satisfied and healthy workforce. This translates directly to improved patient care, increased efficiency, and a stronger healthcare system

overall. Ultimately, prioritizing the well-being of healthcare workers is not just an ethical imperative, but a strategic investment in the future of healthcare delivery. A thriving healthcare system hinges on a thriving workforce, and by addressing these key areas, institutions can create an environment that fosters job satisfaction, reduces absenteeism, and delivers exceptional care.

LIMITATIONS

When writing about limitations in a dissertation or research paper, it's important to acknowledge potential weaknesses or constraints that may impact the results or generalizability of your findings. In my study on job satisfaction among healthcare workers and its effect on absenteeism, here are some potential limitations you might consider:

Sample Size and Selection: Although you have a sample size of 345, which is significant, the sample may not be fully representative of the entire healthcare workforce in tertiary care hospitals. The specific characteristics of the sample may limit the generalizability of the findings to other settings or populations.

Response Bias: Self-reported data on job satisfaction and absenteeism may be subject to response bias. Participants might provide socially desirable answers or underreport absenteeism, affecting the accuracy of the data.

Cross-Sectional Design: If your study is cross-sectional, it provides a snapshot of the situation at one point in time. This design does not allow for the assessment of changes over time or the causal relationships between job satisfaction and absenteeism.

Data Collection Methods: The use of Likert scale questionnaires may have limitations in capturing the full complexity of job satisfaction. Respondents may interpret scale points differently, and the questionnaire may not fully capture qualitative aspects of job satisfaction.

Institutional and Cultural Factors: The study is conducted in various hospitals (Ghaziabad), which may have unique institutional and cultural factors

influencing job satisfaction and absenteeism. These factors might not apply to other hospitals or regions.

Generalizability: Findings from tertiary care hospitals might not be generalizable to other types of healthcare settings, such as primary care or specialized clinics.

Measurement of Absenteeism: The study's measurement of absenteeism may rely on hospital records, which might not capture all forms of absenteeism, such as informal leave or personal reasons.

Temporal Factors: Job satisfaction and absenteeism can be influenced by external factors such as economic conditions, policy changes, or organizational shifts. These temporal factors might not be fully accounted for in the study.

External Validity: The results may be specific to the healthcare context in India and might not apply to healthcare systems in other countries with different practices and policies.

Researcher Bias: As the researcher, your own biases and expectations might influence the interpretation of results, despite efforts to remain objective.

Sample Size and Generalizability:

Sample Size: Although a sample size of 345 is substantial, it may not fully represent the diversity of healthcare workers in other institutions or regions. Variations in job satisfaction and absenteeism could differ in hospitals with different sizes, specializations, or geographical locations.

Generalizability: Findings from Hospitals may not be generalizable to all tertiary care hospitals or healthcare settings, especially those with different organizational structures or cultural contexts.

Response Bias:

Self-Reported Data: The study relies on self-reported data from questionnaires, which can be influenced by social desirability bias. Healthcare workers might underreport dissatisfaction or absenteeism to present themselves in a more favorable light.

Response Rate: A lower response rate could impact the reliability of the findings. If the response rate is not high, the sample might not accurately reflect the overall population of healthcare workers at the hospitals.

Temporal Factors:

Time Frame: The study's one-year duration may not capture long-term trends in job satisfaction and absenteeism. Changes in hospital policies, economic conditions, or healthcare regulations during or after the study period could influence the results.

Short-Term Absenteeism: The focus on job satisfaction might not account for short-term factors affecting absenteeism, such as temporary illnesses or personal issues.

Data Collection Methods:

Questionnaire Design: The validity and reliability of the Likert scale used in the questionnaires could affect the accuracy of the data. Any ambiguity or lack of clarity in the questions might lead to misinterpretation or inconsistent

responses.

Data Collection Constraints: Limited access to certain departments or shifts might lead to an incomplete picture of job satisfaction and absenteeism across the hospitals.

External Factors:

Organizational Changes: Changes in hospital management, policies, or staff during the study could impact job satisfaction and absenteeism rates, making it challenging to isolate the effects of job satisfaction alone.

Economic and Social Factors: External economic conditions, such as inflation or economic downturns, could influence job satisfaction and absenteeism but might not be directly accounted for in the study.

Bias in Qualitative Data:

Interviewer Bias: If qualitative interviews or focus groups are used, interviewer bias might influence responses. The interviewer's tone, questions, or body language could affect how participants respond.

Interpretation Bias: Analysis of qualitative data might be subjective, and different researchers might interpret responses differently. This could impact the consistency and reliability of the findings.

Scope of Study:

Limited Focus: The study's focus on employee perspectives might not consider managerial or administrative viewpoints, which could also influence job satisfaction and absenteeism.

Specific Institution: Concentrating on Santosh Hospital may not account for variations in job satisfaction and absenteeism that could be present in other healthcare settings, such as private hospitals or primary care centers.

Although your sample size of 345 is substantial, it is specific to Santosh Hospital, Ghaziabad. This could limit the generalizability of your findings to other hospitals or healthcare settings.

Different healthcare institutions may have varying work environments, management practices, and employee demographics, which can influence job satisfaction and absenteeism differently. Thus, findings from your study may not be applicable to other hospitals or healthcare organizations.

If the sample is not randomly selected or if certain groups of healthcare workers are overrepresented or underrepresented, it could introduce bias.

For example, if your sample primarily includes workers from specific departments or job roles, their experiences might not reflect those of all healthcare workers. This could skew the results and limit their applicability.

The use of self-reported questionnaires for assessing job satisfaction and absenteeism can lead to response biases.

Participants might provide socially desirable responses or may not accurately recall their absenteeism or satisfaction levels. This can affect the validity and reliability of your findings.

If your study is cross-sectional, it captures data at a single point in time.

This means you can identify associations between job satisfaction and absenteeism but cannot determine causation or how these factors might change over time. Longitudinal studies would be more effective in capturing these dynamics.

External factors, such as changes in hospital policy, economic conditions, or health crises (like the COVID-19 pandemic), may influence job satisfaction and absenteeism.

These factors can impact employees' perceptions and behaviors in ways not

accounted for in your study, potentially affecting the accuracy of your findings.

Healthcare workers have diverse job roles, from administrative staff to frontline medical professionals, each with different stressors and satisfaction levels.

This variability might mean that job satisfaction and absenteeism are influenced by role-specific factors that are not uniformly captured in your study.

The cultural and institutional context of the Hospitals might influence the study's outcomes.

Organizational culture, management practices, and regional differences can affect job satisfaction and absenteeism in ways that may not be applicable elsewhere.

The method of data collection (e.g., online surveys, and face-to-face interviews) can impact response rates and data quality.

For instance, if some employees are less likely to participate or if the method does not capture nuanced information about job satisfaction, it could affect the comprehensiveness of the data.

Job satisfaction is a subjective construct and can be influenced by personal expectations, experiences, and perceptions.

Different individuals may interpret and report their job satisfaction differently based on their standards and experiences, which can introduce variability in the data.

As the researcher, you might have implicit biases that could affect the interpretation of data.

Your perspectives and expectations might influence how you analyze and present the results, potentially affecting the objectivity of your findings.

Your study might not account for all factors that influence job satisfaction and absenteeism.

Factors such as personal life issues, career development opportunities, and job security could also play significant roles but may not be fully addressed in your research.

RECOMMENDATIONS

These recommendations are aimed at creating a more positive and supportive work environment for healthcare professionals, ultimately leading to better patient care and a stronger healthcare system.

Enhance Supportive Work Environment:

Reduce Workload and Stress: Implement staffing strategies to ensure adequate nurse-to-patient ratios and manageable workloads. Explore flexible scheduling options to promote work-life balance.

Promote Recognition and Appreciation: Regularly acknowledge and reward staff for their hard work and dedication. This fosters a positive and supportive work environment.

Invest in Mental Health Resources: Provide access to mental health resources and support programs to help healthcare workers cope with stress and burnout.

Improve Communication and Collaboration: Encourage open communication between staff and management. Address concerns promptly and foster a collaborative environment where staff feel valued and heard.

Review and Revise Leave Policies:

Analyze Leave Usage Data: Identify patterns and trends in sick leave and annual leave usage to understand the reasons behind absenteeism.

Increase Leave Allowance: Consider increasing the amount of annual leave offered or implementing more flexible leave options like personal leave days.

Streamline Leave Approval Processes: Make the process of requesting and taking leave clear, efficient, and user-friendly.

Offer Paid Sick Leave: Providing paid sick leave allows workers to stay home

when they are genuinely ill without fear of financial repercussions.

Invest in Continuous Learning and Development:

Training Opportunities: Regularly provide opportunities for professional development through workshops, conferences, and skill-building programs.

Career Advancement: Create clear pathways for advancement and offer mentorship programs to guide and motivate staff.

Tuition Reimbursement: Consider offering tuition reimbursement programs to help healthcare workers pursue further education.

Invest in Technology: Equip staff with the latest technology and tools to improve efficiency and streamline workflows.

Promote Wellbeing and Work-Life Balance:

Flexible Work Arrangements: Explore options like part-time schedules, job sharing, or remote work opportunities to accommodate personal needs.

Healthy Lifestyle Habits: Offer on-site fitness programs, healthy food options in cafeterias, and resources for stress management techniques.

Encourage Breaks and Time Off: Discourage excessively long hours and encourage staff to take breaks and utilize their allotted leave time.

By implementing these strategies, healthcare institutions can address workload, leave policies, professional development, and well-being, leading to improved job satisfaction, reduced absenteeism, a satisfied and healthy workforce, better patient care, and a stronger healthcare system.

Future Research:

Conduct Longitudinal Studies: Track absenteeism rates alongside satisfaction

measures over time to understand the long-term effects of job satisfaction on absenteeism.

Analyze Specific Reasons for Dissatisfaction with Leave Policies: Investigate the underlying causes of dissatisfaction with leave policies and explore potential solutions.

Investigate Other Factors Influencing Absenteeism: Examine the role of workload, stress management, and workplace culture in absenteeism rates.

Self-Reported Data: The analysis relied on self-reported data, which can be susceptible to bias.

Unknown Study Population and Response Rate: The study population and response rate are unknown, limiting generalizability.

Indirect Measurement of Absenteeism: The survey did not directly measure absenteeism rates.

What are the key metrics for job satisfaction among healthcare workers?

Key metrics for job satisfaction among healthcare workers include:

Job Security

Work Environment

Salary and Benefits

Work-Life Balance

Professional Development Opportunities

Interpersonal Relationships

Recognition and Rewards

Management Support

Workload and Stress Levels

These metrics provide a comprehensive understanding of the factors that influence job satisfaction among healthcare workers.

What strategies can improve job satisfaction among healthcare workers?

Strategies to improve job satisfaction among healthcare workers include:

Improving Work Conditions: Ensuring a safe and comfortable work environment.

Offering Competitive Salaries and Benefits: Providing adequate compensation and benefits packages.

Promoting Work-Life Balance: Implementing flexible work schedules and offering support for personal needs.

Providing Professional Development: Offering continuous training and development opportunities.

Enhancing Communication: Encouraging open and transparent communication between staff and management.

Recognizing and Rewarding Employees: Acknowledging and rewarding employees' hard work and achievements.

Strengthening Management Support: Ensuring supportive and accessible management.

Reducing Workload and Stress: Managing workloads effectively and providing resources to cope with stress.

Based on the findings of the study assessing job satisfaction among healthcare workers and its effect on absenteeism at Hospitals, in Ghaziabad, the following recommendations are proposed to improve job satisfaction and reduce absenteeism:

Enhance Communication and Feedback Mechanisms:

Implement regular feedback sessions where employees can voice their concerns and suggestions.

Establish clear channels of communication between management and staff to address issues promptly.

Develop and Promote Career Development Opportunities:

Provide ongoing training and professional development programs to enhance employees' skills and career growth.

Create clear career progression paths to motivate employees and reduce turnover.

Improve Work-Life Balance:

Introduce flexible working hours or shift options to help employees better balance their personal and professional lives.

Offer support programs such as counseling services or stress management workshops.

Recognize and Reward Employee Performance:

Implement a structured recognition and reward system to acknowledge outstanding performance and achievements.

Regularly review and adjust compensation packages to ensure they are competitive and fair.

Enhance Workplace Environment:

Invest in improving the physical work environment to ensure it is safe, comfortable, and conducive to productivity.

Promote a positive organizational culture that fosters teamwork, respect, and collaboration among staff.

Implement Strategies to Reduce Burnout:

Develop programs to address and mitigate burnout, such as providing adequate rest periods and reducing excessive workloads.

Monitor workloads and make necessary adjustments to prevent employee fatigue and stress.

Monitor and Evaluate:

Continuously monitor job satisfaction levels through regular surveys and feedback mechanisms.

Evaluate the effectiveness of implemented strategies and make adjustments as needed to address emerging issues.

Engage in Health and Wellness Initiatives:

Promote health and wellness programs that support employees' physical and mental health.

Offer resources such as fitness programs, nutritional advice, and mental health support.

Strengthen Team Building Activities:

Organize regular team-building activities to improve teamwork, collaboration, and employee morale.

Encourage a supportive and inclusive work environment through various team engagement initiatives.

By implementing these recommendations, Santosh Hospital can foster a more satisfying work environment, which in turn is expected to reduce absenteeism and improve overall employee performance and well-being.

Here are detailed recommendations for your dissertation on job satisfaction among healthcare workers and its effect on absenteeism:

Improve the physical and emotional work environment by providing adequate resources and facilities.

Upgraded Facilities: Ensure that workspaces are well-maintained, clean, and comfortable. This includes upgrading medical equipment, ensuring proper lighting, and providing ergonomic furniture.

Support Services: Offer amenities such as break rooms, rest areas, and access to mental health support. Provide tools and resources to help healthcare workers manage their workload effectively.

Regular Maintenance: Implement a routine maintenance schedule to address any issues with facilities or equipment promptly.

Implement policies and practices that support a healthy work-life balance.

Flexible Scheduling: Offer flexible work hours or shift options to accommodate personal needs and reduce burnout.

Leave Policies: Review and enhance leave policies to ensure that healthcare workers can take time off without fear of repercussions. Include provisions for paid sick leave and personal days.

Support for Families: Provide support for family responsibilities, such as childcare assistance or family leave policies.

Invest in the continuous professional development of healthcare workers.

Training Programs: Offer regular training sessions, workshops, and seminars on the latest medical practices and technologies.

Career Advancement: Develop clear career progression paths and provide opportunities for advancement within the organization.

Educational Support: Provide financial support or incentives for further education and specialization.

Create a positive, inclusive, and supportive work culture.

Recognition Programs: Implement formal recognition programs to acknowledge and reward outstanding performance and contributions.

Open Communication: Encourage open and transparent communication between staff and management. Regularly seek feedback and address concerns promptly.

Team Building: Organize team-building activities and events to strengthen relationships and improve collaboration among staff members.

Manage job demands and workload to prevent excessive stress and burnout

Workload Assessment: Regularly assess and adjust workloads to ensure that they are manageable. Distribute tasks equitably among staff.

Support Staff: Provide additional support during peak times or staff shortages,

such as temporary hires or adjusted schedules.

Workload Management Tools: Implement tools and systems to help manage and prioritize tasks effectively.

Review and enhance compensation and benefits to ensure they are competitive and fair.

Competitive Salaries: Conduct salary benchmarking to ensure that compensation packages are competitive with industry standards.

Comprehensive Benefits: Offer a comprehensive benefits package that includes health insurance, retirement plans, and other relevant benefits.

Incentives: Provide performance-based incentives and bonuses to motivate and reward employees.

Continuously monitor job satisfaction levels and absenteeism rates to identify and address issues proactively.

Regular Surveys: Conduct regular surveys to assess job satisfaction and identify areas for improvement.

Data Analysis: Analyze absenteeism data to identify trends and potential causes. Use this data to inform and adjust policies and practices.

Feedback Mechanisms: Establish feedback mechanisms to allow employees to voice their concerns and suggestions for improvement.

Implementing these recommendations can help address the factors affecting job satisfaction and absenteeism, ultimately leading to a more engaged and productive healthcare workforce.

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ANNEXURES

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ANEXXURE 1

Employee Satisfaction Index (ESI)

SECTION 1- Demographic information (जनसांख्यिकी य जानकारी)

NAME (OPTIONAL) नाम (वकैल्पिक)	AGE उम्र
MARITAL STATES वैहिकस्थित	DEPARTMENT विभाग
QUALIFICATION योग्यता	WORK EXPERIENCE(CURRENT) कार्य अनभुव (वर्तमर्तान)
ADDRESS पता	TOTAL WORK EXPERIENCE कुल कार्य अनभुव
CURRENT POSITION वर्तमर्तान पद	GENDERलिग

	Strongly dissatisfied बहत असंतुष्ट	Dissatisfied असंतुष्ट	Neutral तटस्थ	Satisfied संतुष्ट	Strongly satisfied **पूरी तरह संतुष्ट**
SECTION 2- Job satisfaction नौकरी से संतुष्ट					
1. I am satisfied with my current job					
1. मैं अपनी वर्तमान नौकरी से संतुष्ट हं					
2. I feel that my work load is manageable					
2. मझे लगता है कि मेरा काम का बोझ प्रबंधनीय है					
3. I feel supported by collegues and supvisors					
3. मैं सहकर्मियों और पर्यवेक्षकों द्वारा समर्थित महसूस करता हं					
4. I feel valued for the work I do					
4. मैं जो काम करता हं उसके लिए मैं मूल्यवान महसूस करता हं					
5. I have enough opportunities for carrer advancement in my current job					
5. मेरी वर्तमान नौकरी में कैरियर की उन्नति के लिए मेरे पास पर्याप्त अवसर हैं					
6. I am satisfied with my salary and benefits					
6. मैं अपने वेतन और लाभों से संतुष्ट हं					
7. I feel respected by my superiors					
7. मैं अपने वरिष्ठों द्वारा सम्मानित महसूस करता हूँ					
8. I feel that my job is secure					
8. मझे लगता है कि मेरी नौकरी सुरक्षित है					
SECTION 3 - work environment कार्य वातावरण					
9. I feel that the work environment affect my job satisfaction					
9. मझे लगता है कि काम का माहौल मेरी नौकरी की संतुष्टि को प्रभावित करता है					
10. I have a good work life balance					
10. मेरा कार्य-जीवन संतलन अच्छा है					
11. How would you rate the overall work environment					
11. आप समग्र कार्य वातावरण का मूल्यांकन कैसे करेंगे?					
SECTION 4 - Job performance कार्य निष्पादन					
12. I am satisfied with my job performance					
12. मैं अपने कार्य प्रदर्शन से संतुष्ट हं					
13. My job satisfaction level affects my job performance					
13. मेरी कार्य संतुष्टि का स्तर मेरे कार्य निष्पादन को प्रभावित करता है					
14. How would you rate your job performance					
14. आप अपनी नौकरी के प्रदर्शन को कैसे आकेंगे?					
SECTION 5 - Job expectations नौकरी की अपेक्षाएँ					
15. My current job meets my initial expectations when I started working in health					
15. जब मैंने स्वास्थ्य देखभाल में काम करना शुरू किया तो मेरी वर्तमान नौकरी मेरी शुरुआती अपेक्षाओं पर खरी उतरती है					
16. My expectations of the job have changed since I started working in health care					
16. जब से मैंने स्वास्थ्य देखभाल में काम करना शुरू किया है तब से नौकरी को लेकर मेरी उम्मीदें बदल गई हैं					
SECTION 6 - Job satisfaction comparison नौकरी से संतुष्टि की तलना					
17. My current job satisfaction level is higher than when I first started working in health care					
17. जब मैंने पहली बार स्वास्थ्य देखभाल में काम करना शुरू किया था, तब से मेरा वर्तमान नौकरी संतुष्टि स्तर अधिक है					

SECTION 7 - Job motivation नौकरी की प्रेरणा					
18. I am motivated to perform well in my job					
18. मैं अपनी नौकरी में अच्छा प्रदर्शन करने के लिए प्रेरित हं					
SECTION 8 - Job benefits and Perks नौकरी के लाभ और भत्ते					
19.I am satisfied with the level of salary I am getting related to my experience.					
19. मैं अपने अनुभव से संबंधित वेतन के स्तर से संतुष्ट हं।					
20. I am satisfied with the benefits and perks by my employer					
20. मैं अपने नियोक्ता द्वारा लाभों और भत्तों से संतुष्ट हं					
SECTION 9 - Job training and Development नौकरी प्रशिक्षण और विकास					
21. I have enough opportunities for carrer advancement in current job					
21. मेरे पास वर्तमान नौकरी में कैरियर में उन्नति के लिए पर्याप्त अवसर हैं					
22. I have recived sufficient training to perform my job effectively					
22. मुझे अपना काम प्रभावी ढंग से करने के लिए पर्याप्त प्रशिक्षण मिला है					
23. I am satisfied with the training and development opportunities provided by my employer					
23. मैं अपने नियोक्ता द्वारा प्रदान किए गए प्रशिक्षण और विकास के अवसरों से संतुष्ट हं					
SECTION 10 - Job streesand proposed strategies and implementation					
नौकरी का तनाव और प्रस्तावित रणनीतियाँ और कार्यान्वयन					
24. I feel stressed at work					
24. मुझे काम पर तनाव महसूस होता है					
25. Implementing flexible work hours to improve work life balance					
25. कार्य जीवन संतुलन में सुधार के लिए लचीले कार्य घंटे लागू करना					
26. Providing opportunities for career advancement and professional development					
26. कैरियर में उन्नति और व्यावसायिक विकास के अवसर प्रदान करना					
27. increasing recongnition and rewards for good performance					
27. अच्छे प्रदर्शन के लिए मान्यता और पुरस्कार बढ़ाना					
SECTION 11 - Absenteesim अनुपस्थिति					
28. I have taken more sick leave than I would like due to job dissatisfaction					
28. नौकरी में असंतोष के कारण मैंने अपनी इच्छा से अधिक बीमार छुट्टियाँ ली हैं					
29. I have taken more annual leaves than I would like due to job dissatisfaction					
29. नौकरी में असंतोष के कारण मैंने अपनी इच्छा से अधिक वार्षिक छुट्टियाँ ली हैं					
30. you are satisfied with leaves facility					
30. आप अवकाश की सुविधा से संतुष्ट हैं					

Score card

Section	Name of section	Maximum score	Individual score	Percentage
A	Job satisfaction	40	a	a÷40×100%
B	work environment	15	b	b÷15×100%
C	Job performance	15	c	c÷15×100%
D	Job Expectations	10	d	d÷10×100%
E	Job satisfaction comparison	5	e	e÷5×100%
F	Job motivation	5	f	f÷5×100%
G	Job benefits and Perks	10	g	g÷10×100%
H	Job Training and Development	15	h	h÷15×100%
I	Job stress and proposed strategies and implementation	20	i	i÷20×100%
J	Absenteeism	15	j	j÷15×100%
	Total score	150		e÷150×100%

Low = 0-50

Moderate = 51-100

High = 101-150

ANEXXURE 2

ETHICAL CONSIDERATION CERTIFICATE

SANTOSH
Deemed to be University
(Established u/s 3 of the UGC Act, 1956)

F. No. SU/R/2024/1344[31] Dated: 1

Subject: Grant of Ethical Clearance for **Dissertation Protocol** Topic **"Job sati Health Care Workers in a Tertiary Care Hospital",** submitted by student of Master in Hospital Administration, 2022 Batch.

*****

With reference to the request for grant of Ethical Clearance for the Diss entitled **"Job Satisfaction Among Health Care Workers in a Tertiary Care Hospital"** informed that the **Dissertation Protocol** submitted by him/her was considered **Committee** of the **Allied Health Sciences** in its meetings held on 07.02.2024 and recommendations of the **Screening Committee** were considered in detail by the **In Committee** in its meeting held on **15.05.2024** and the same was **approved** by the **E** of the **Santosh Deemed to be University, Ghaziabad, Delhi NCR**.

He /She is informed accordingly for further necessary action.

17/5/24

[Dr. EZHILRAJAN. K]
REGISTRAR

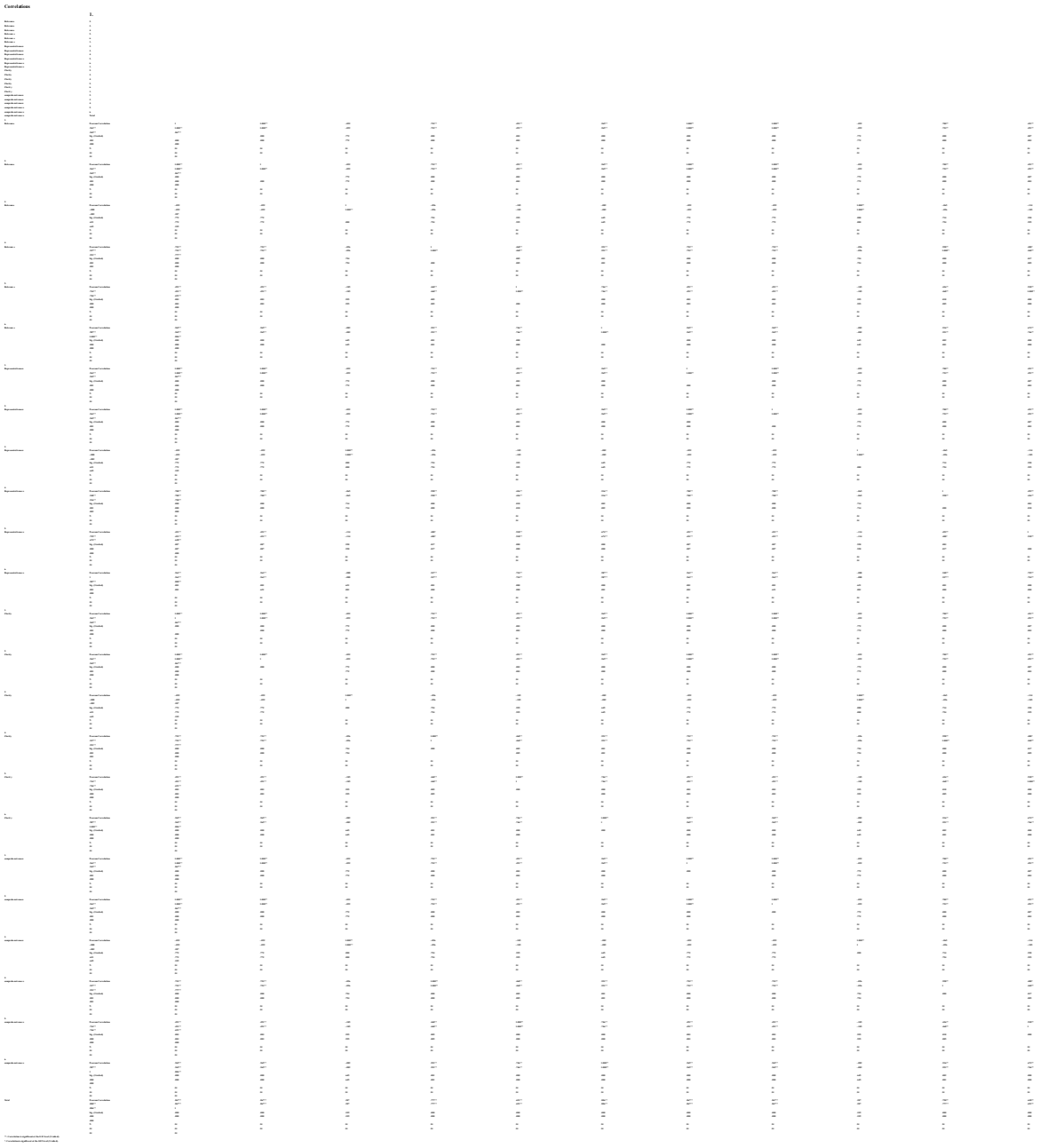
NEHA BHARTI
Master in Hospital Administration.

Copy to:

1. The Vice Chancellor
2. The Dean – Academics
3. The Dean, SMC&H
4. The Dean – Research
5. The Director - IQAC
6. HOD/ Course In-charge of the concerned Department.

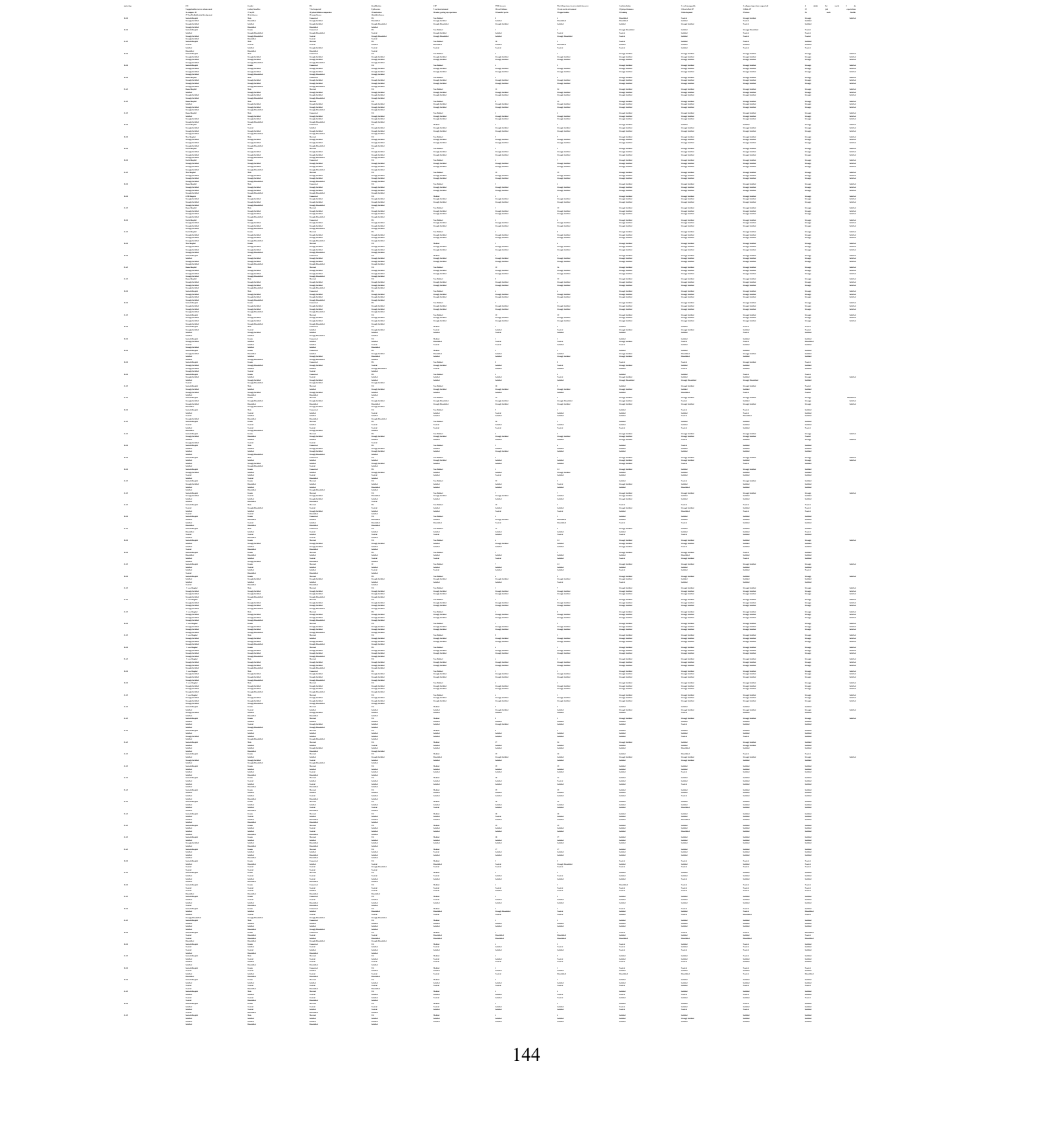
ANEXXURE 3

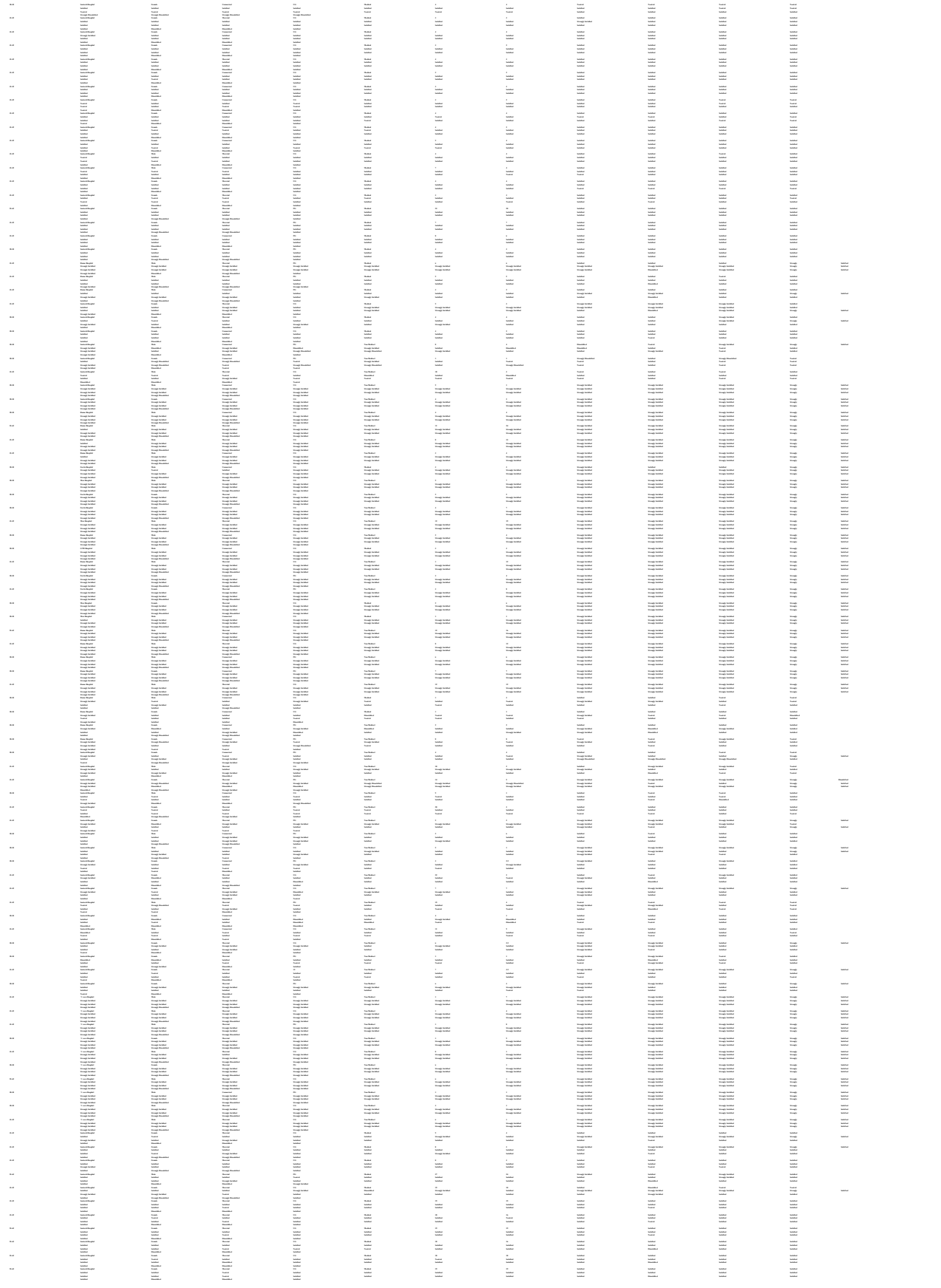
VALIDATION CERTIFICATE

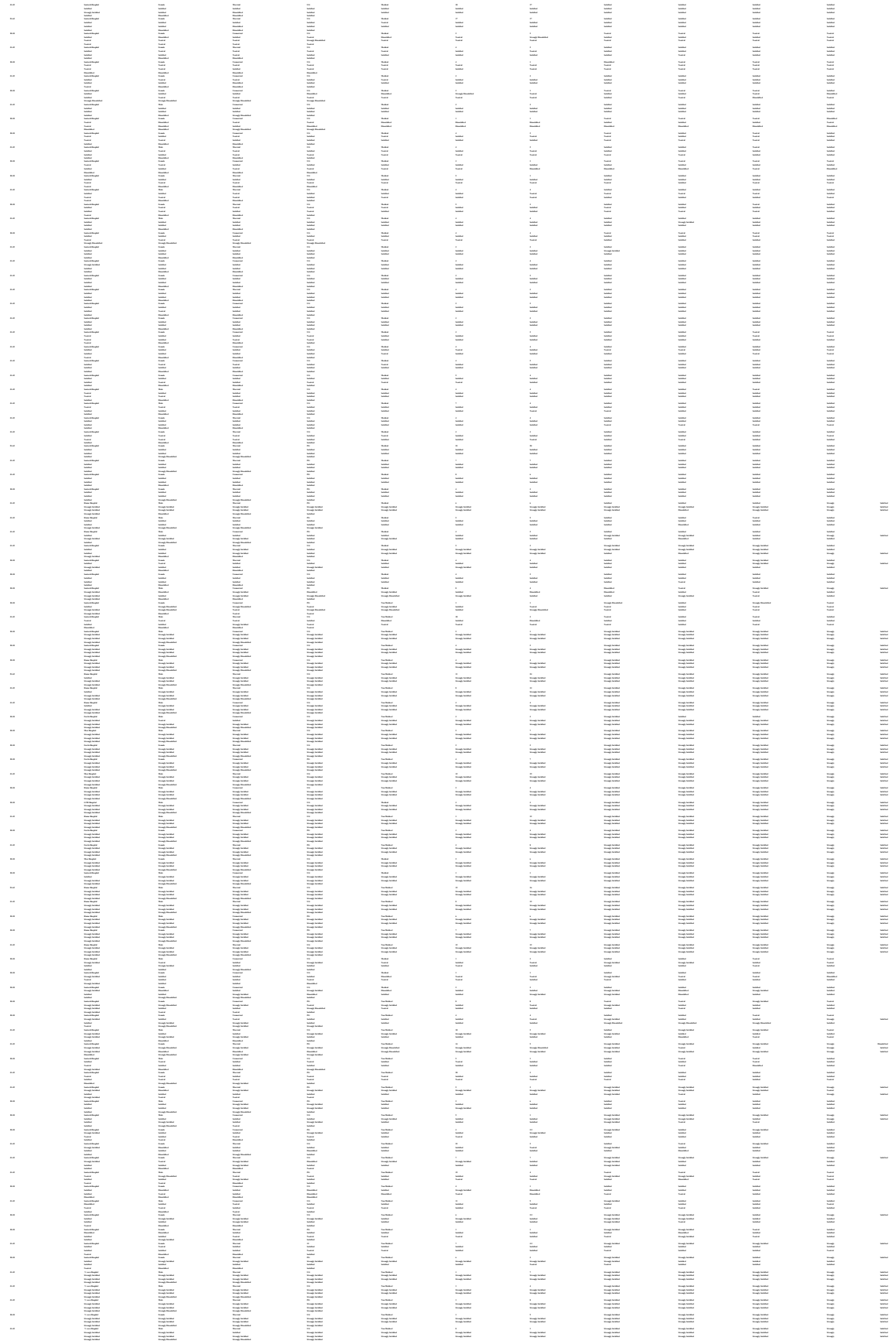


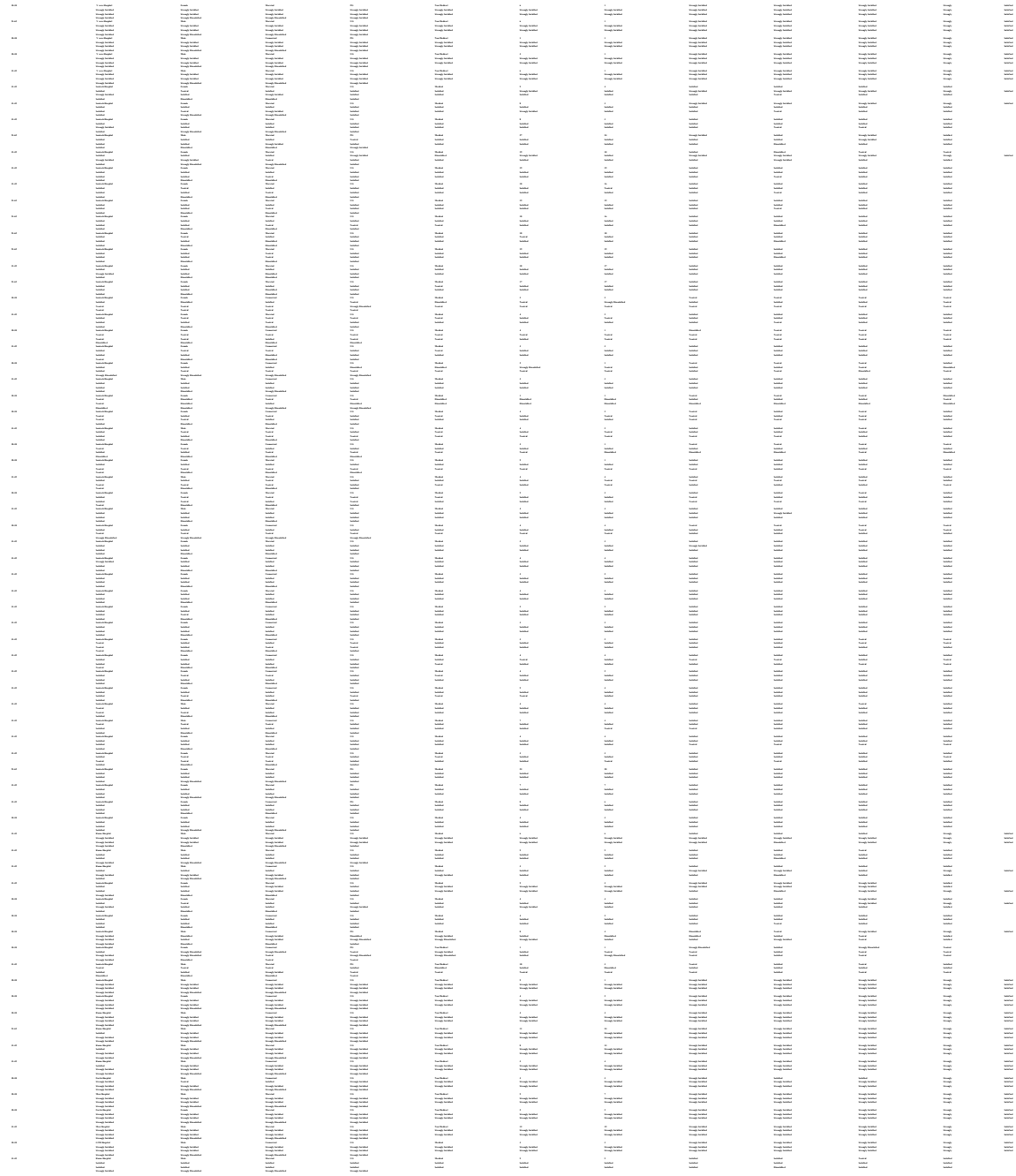
ANEXXURE 4

MASTER DATA SHEET









ANEXXURE 5

STATICIAN CERTIFICATE

SANTOSH Deemed to be University

SANTOSH Central Research Facility

CENTER FOR INTERDISCIPLINARY RESEARCH AND INNOVATION

To Whom It May Concern

This is to certify that the Post-Graduate Dissertation entitled **"Job satisfaction among health care workers in tertiary care hospitals and effect of satisfaction level on their absenteeism."** by Mr./**Ms.**/Dr **Neha Bharti**, Department of Hospital Administration (PhD/MD/MS/MDS/MSc/**MHA**), Batch-(2022-24) has been carefully assessed and authenticated by the Assistant Prof-Cum Bio-statistician of Santosh Deemed to be University.

This certification is issued based on the examination and review conducted by the Biostatistician, confirming adherence to statistical principles and practices.

Date: 24.07.2024

Signature:

Dr. Amod Kumar

(Assistant Professor cum Bio- Statistician)

Department of Community Medicine,

Santosh Deemed to be University Ghaziabad,

Delhi (NCR)

ANEXXURE 6

CONSENT FORM

SANTOSH MEDICAL COLLEGE AND HOSPITAL (GHAZIABAD)

INFORMED CONSENT

I _____ Son/Daughter/Wife of _____ resident of _____.

hereby declare that I give my full, free, and voluntary informed consent in the thesis –**"JOB SATISFACTION AMONG HEALTHCARE WORKERS IN TERTIARY CARE HOSPITALS AND ITS EFFECT OF SATISIFACTION LEVEL ON THEIR ABSENTEESIMIN ",** _____ has informed me to my satisfaction, in the language I understand, about the purpose, nature of the study and various investigations for the study to be carried out. I have been informed about the duration of the study and instructions to be followed during the study period.

I give full consent for being enrolled in the above study and I reserve my rights to withdraw from this study, whenever I wish without prejudice of my right to undergo further treatment at Santosh Hospital, Ghaziabad U.P.

Signature of candidate
Or thumb impression

Name: Date:

We have witnessed that the candidate signed the above form in the presence of his free will after fully understanding its content.

Signature of Witness

Name

Signature of Investigator
Name: Neha Bharti
Designation: PG Department of Hospital Administration
Contact No.- 9773720388

संतोष मेडिकल कॉलेज एवं अस्पताल (गाजियाबाद)
सहमति पत्र (सूचित)

मैं _____ बेटा / बेटी /पत्नी_____
निवासी _____ घोषणा करता हूं कि

डॉ ._____, ने मुझे मेरी भाषा में अपने अध्ययन –"JOB SATISFACTION AMONG HEALTHCARE WORKERS IN TERTIARY CARE HOSPITALS AND ITS EFFECT OF SATISFACTION LEVEL ON THEIR ABSENTEESIMIN ", के उद्देश्य के बारे में, और अध्ययन के दौरान अपनाई जाने वाली विभिन्न प्रयोगशाला जांच के बारे में सूचित कर दिया है। मुझे अध्ययनकी अवधि और उसके दौरान अपनाए जाने वाले निर्देश भी मेरी भाषा मे समझा दिए गए हैं| मैं उपरोक्त अध्ययन में बिना किसी दबाव के दाखिला ले रहा हूं और पूर्ण सहमति दे रहा हूं | सन्तोष अस्पताल, गाजियाबाद में अपने आगे के उपचार पर बिना प्रतिकूल प्रभाव डाले इस अध्ययन से और प्रयोगशाला जांच की प्रकृति से मैं जब चाहूँ बाहर जाने के अपने अधिकार को सुरक्षित रख रहा हूं|

उम्मीदवार के हस्ताक्षर
नाम
दिनांक:
मेरी उपस्थिति में उम्मीदवार ने पूरी तरह से डाकटर के बताए गए अध्ययन और निर्देशों को समझने के बाद अपनी स्वतंत्र इच्छा से ऊपर के फार्म पर हस्ताक्षर किए हैं ।
हस्ताक्षर

नाम: नेहा भारती
पदनाम: पीजी
अस्पताल प्रशासन विभाग
संपर्क नंबर- 9773720388

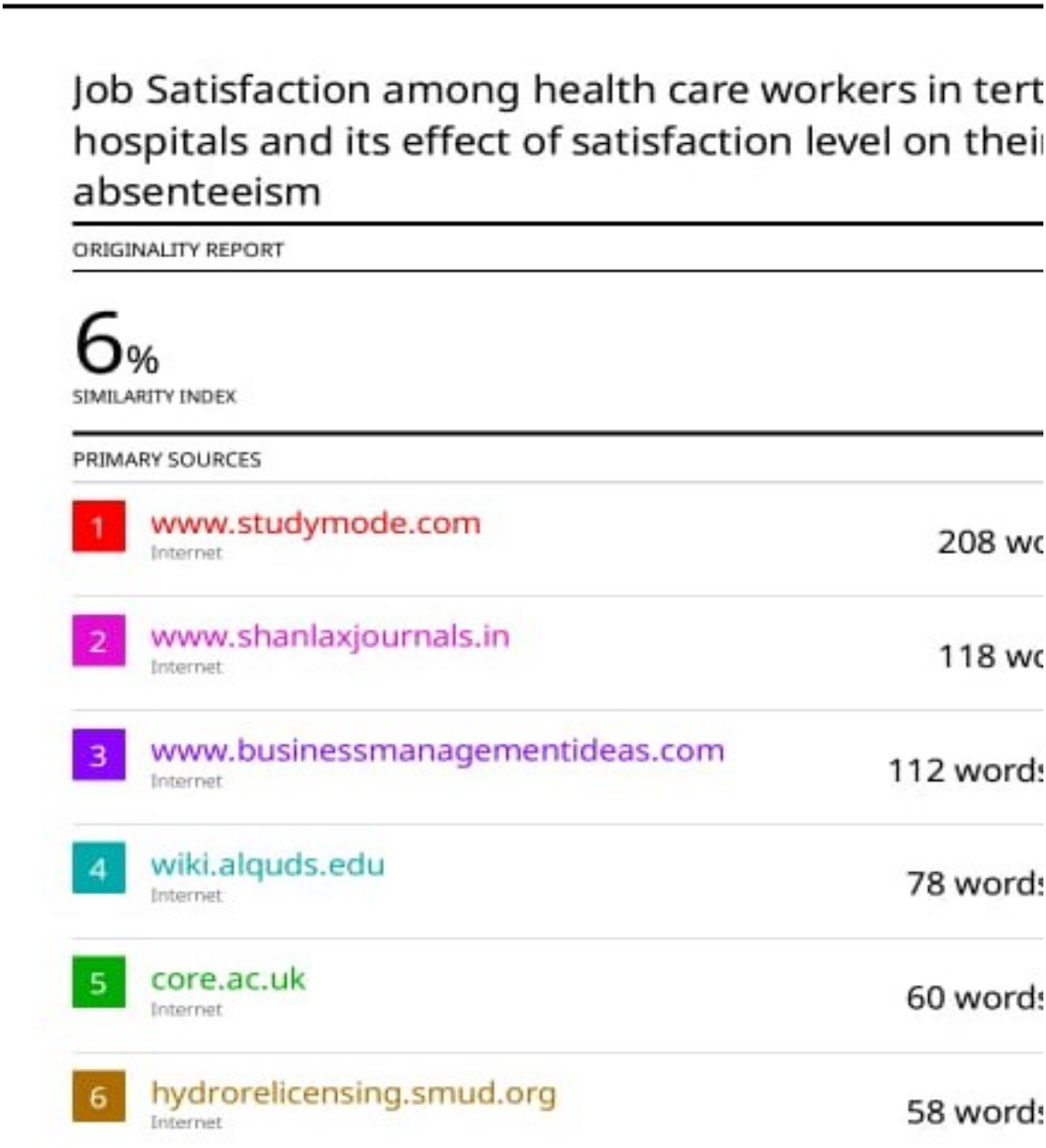
ANEXXURE 7

MASTER CHART OUTLINE

Parameter	No of question	Likert scale for frequency				
		1. Strongly Dissatisfied	2.Dissatisfied	3. Neutral	4. satisfied	5. strongly satisfied
Analysis of gender	1	Male				Female
Analysis of age	1	18 to 30		31 to 50		51 to 65
Job satisfaction	1 to 13	1	2	3	4	5
Work environment	1 to 5	1	2	3	4	5
Absenteeism	1 to 4	1	2	3	4	5
Job performance	1 to 3	1	2	3	4	5
Job expectations	1 to 5	1	2	3	4	5
Job satisfaction comparison	1 to 3	1	2	3	4	5
Job motivation	1 to 4	1	2	3	4	5
Job benefits and perks	1 to 2	1	2	3	4	5
Job training and development	1 to 6	1	2	3	4	5
Job stress, proposed\strategies and implementation	1 to 15	1	2	3	4	5

ANEXXURE 8

PLAGIARISM REPORT



Job Satisfaction among health care workers in tert
hospitals and its effect of satisfaction level on thei
absenteeism

ORIGINALITY REPORT

6%
SIMILARITY INDEX

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